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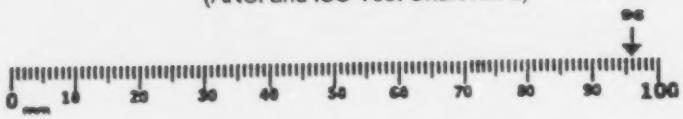

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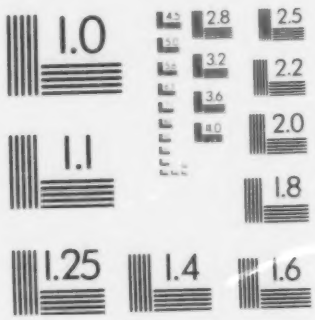

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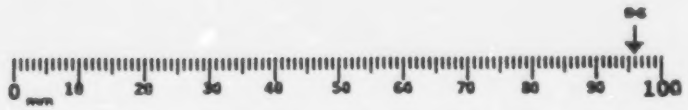

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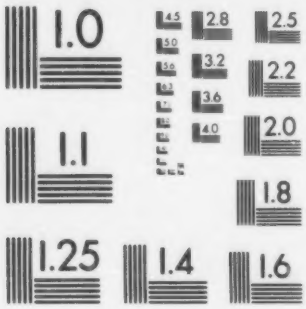

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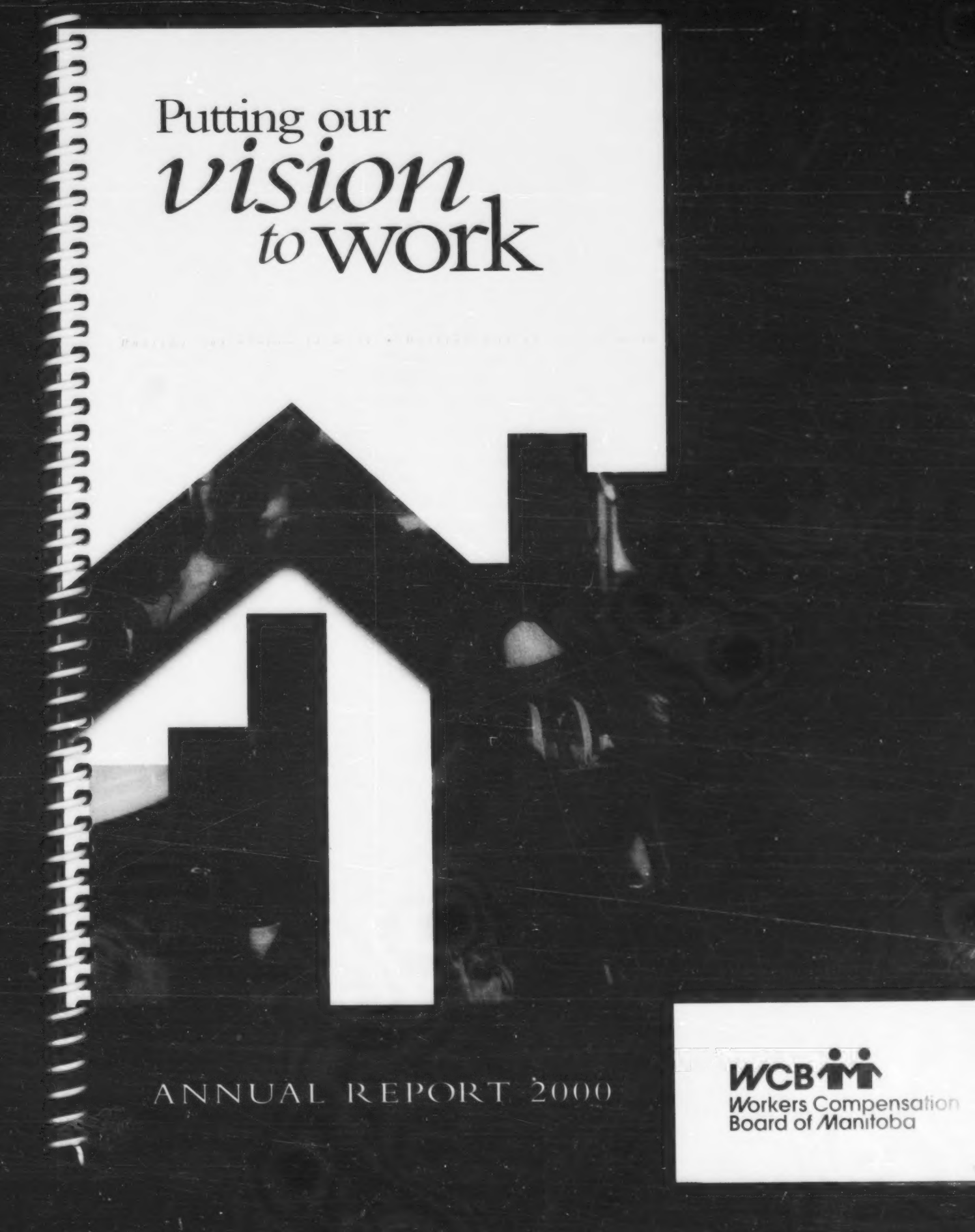
Putting our *vision* to work



ANNUAL REPORT 2000

WCB
Workers Compensation Board of Manitoba

VISION

"Working with our Partners to Build a Safer and Healthier Manitoba."

"It was a year of change. It was a year when we started to put the vision that was developed in 1999 to work. We broke apart how we price our product and how we deliver service to claimants."

"If that had been the only major task it would have been an ambitious year. In addition to changing how we price and deliver our product we changed what we offer to workers, in terms of 13 administrative policy areas and we organized ourselves along business sector lines so that we would better know our clients and their workplaces."

Pat Jacobsen

President & CEO

12

101-04933/

Our Future

Fewer workers become injured or ill

Ensuring fewer than 5% of all workers experience a workplace illness or injury (not 5.6)

Significantly increasing the number of workers covered by the WCB

People return to health and work sooner

Enabling injured workers to return to health and work earlier and remain healthy

Improving our sustainable return to work successes

More customers say we provide superior service

Finding out about accidents within 2 days (not 10.7 days later)

Paying injured workers within 5 days from notification (not 22.7 days)

Scoring over 80% satisfaction in our customer surveys of workers - (up from 70%) and employers (up from 74%)

We have the capacity to continuously improve

Maintaining rates amongst the lowest in the country

Utilizing technology for service innovation

Keeping our administrative costs among the lowest in the country

Improving our investment returns to among the highest in Canada

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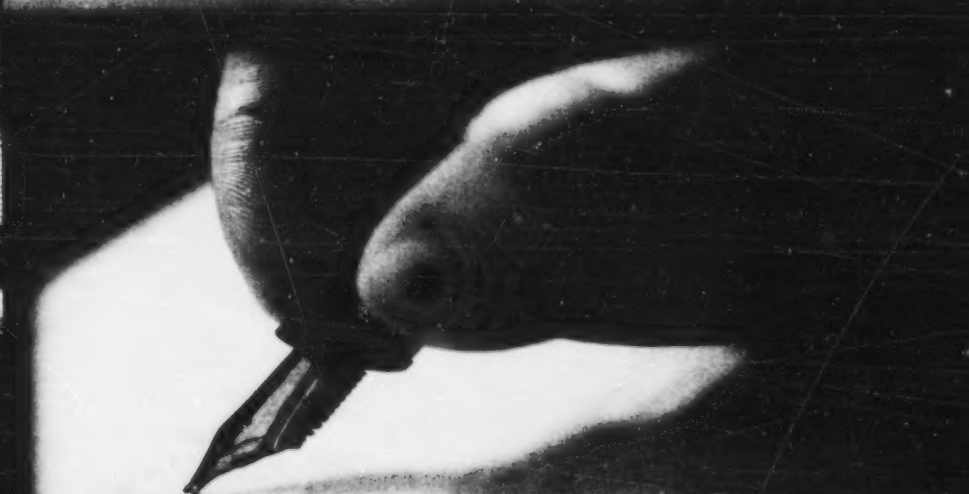


Letter *to the* Minister

March 2001

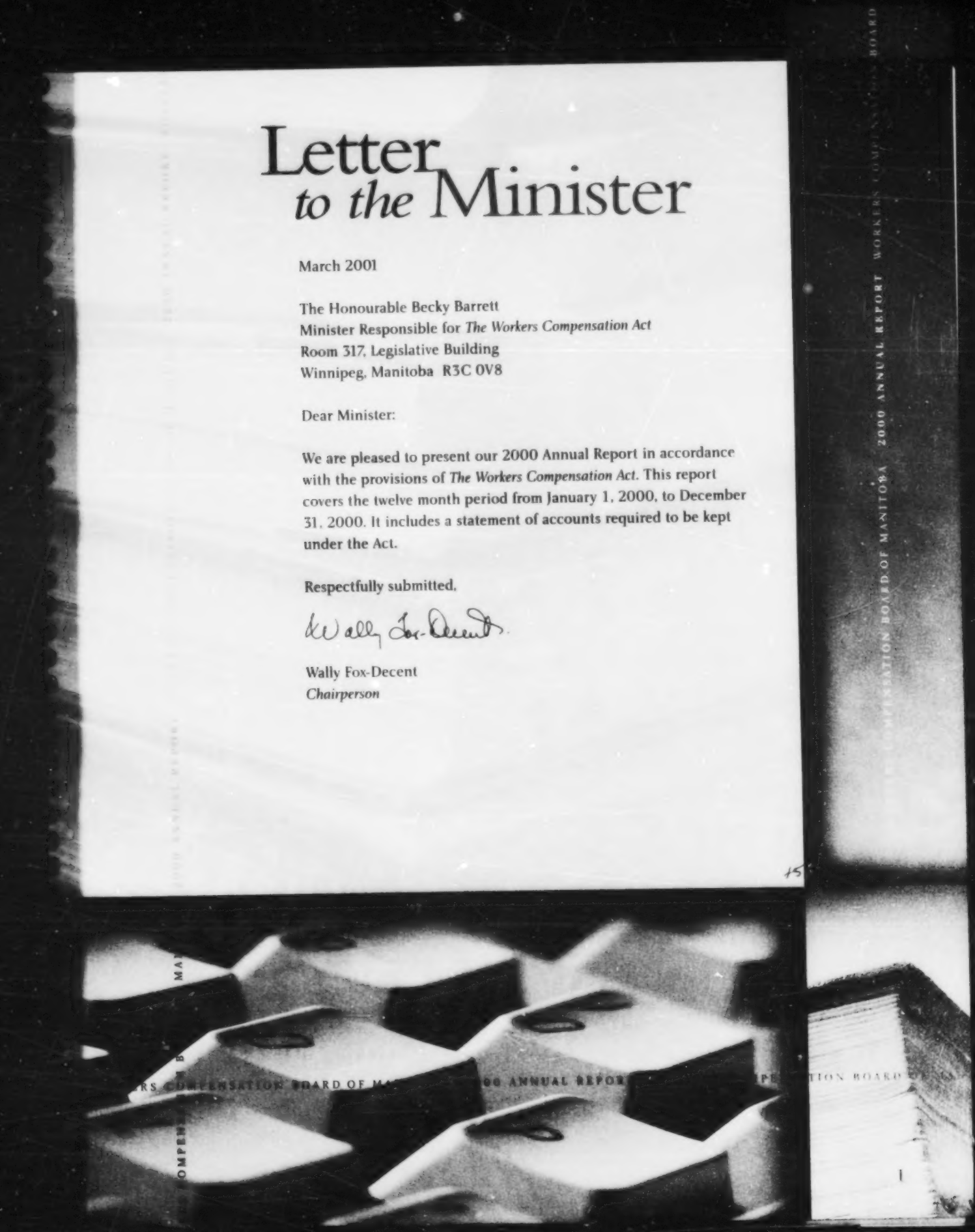
The Honourable Becky Barrett
Minister Responsible for *The Workers Compensation Act*
Room 317, Legislative Building
Winnipeg, Manitoba R3C 0V8

Dear Minister:

We are pleased to present our 2000 Annual Report in accordance with the provisions of *The Workers Compensation Act*. This report covers the twelve month period from January 1, 2000, to December 31, 2000. It includes a statement of accounts required to be kept under the Act.

Respectfully submitted,

Wally Fox-Decent
Chairperson



Letter *from the* Chairperson *and the* President & CEO

When more than 5 of every 100 workers are injured on the job, maintaining the status quo is not an option. That number represents real people. Workplace accidents and injuries impact their lives and the lives of their loved ones, co-workers and employers. This is why we are making accident prevention a keystone of our strategy.

Throughout 2000, we put in place the tools necessary for us to put our vision to work guided by four key goals:

- *reducing the risk of workers getting sick or injured on the job;*
- *returning injured workers to health and work sooner;*
- *improving service to our customers; and*
- *building our own internal capacity to improve continuously.*

We have reorganized along sectoral lines, so that we get to know our employers and our workplaces better. Rather than have staff working on claims from a variety of industries, they specialize in a sector such as mining, manufacturing or transportation. With a better understanding of the industries, the jobs within the industries and the types of injuries, our staff will be able to make more informed decisions that will help workers recover more quickly, help employers prevent accidents and keep skilled workers on the job. When our staff visit workplaces, they hear positive feedback about this new service delivery model. Employers see the value in the new system and see that it has immediate implications for improving their safety records.

We know another important tool in getting injured workers back to health and work sooner is through quicker intervention after an accident has occurred. Currently it takes an average of 10.4 days to find out about a workplace injury or accident. We want to reduce that number to 2 days. Towards this goal, in 2000 we introduced an innovative new reporting method for healthcare providers through our Facts by Fax campaign. Now, instead of batch mailing reports, doctors and chiropractors are faxing them in to a central number. The initial results are excellent and this simplification of the reporting process will continue in 2001, with initiatives directed at workers and employers.

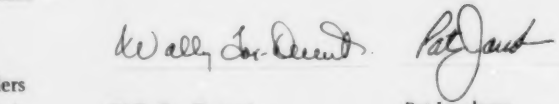
Through extensive consultations, we have developed a new rate model that is more sensitive to employers' experience. The new model rewards employers with good safety records and penalizes those with poor safety records, further emphasizing the importance of safety in the workplace and the benefits of safety in business. Under the new model, employers will have a better understanding of how their accident experience impacts their rates.

A review of our benefit policies in 2000 has enabled us to improve the treatment injured workers receive and ensure they receive the maximum benefits to which they are entitled.

We continue to support and fund education and research projects aimed at preventing workplace accidents and injuries and returning injured workers to health and work sooner. In 2000, we also funded an important education outreach program for high school students to reach youth with the safety message before they enter the workforce.

Each of these initiatives has brought us closer to meeting our four goals. We will further advance these in 2001, building on the progress we made in 2000. On behalf of the Board of Directors and the management and staff of the Workers Compensation Board, we would like to extend our renewed commitment to improve the lives of all Manitobans by working with you to build a safer and healthier Manitoba in 2001.

Sincerely,



Wally Fox-Decent
Chairperson
Board of Directors

Pat Jacobsen
President & CEO

Board *of* Directors *and* Board Committees

The role of the Board of Directors is to approve and oversee the policies and direction of the WCB, including policies respecting compensation, rehabilitation, assessment and appeal procedures. By statute the Board consists of 10 members appointed by Order in Council from nominations submitted by employers, labour and the public. This tripartite representation includes a neutral Board Chair, three representatives of workers, three representatives of employers and three members representing the public interest. The Chief Executive Officer is a non-voting member of the Board of Directors.

Standing from left to right:

Barrie Simoneau, *Employer Representative* • Sharon Seabourne, *Employer Representative*
Wally Fox-Decent, *Chairperson* • Dayna Hammond, *Public Interest Representative*
Neil Enns, *Public Interest Representative* • Karen Naylor, *Worker Representative*

Sitting from left to right:

Ed Gallos, *Employer Representative* • Bruno Zimmer, *Worker Representative*
Pat Jacobsen, *President & Chief Executive Officer* • Margaret Day, *Worker Representative*
Keith Ferbers, *Public Interest Representative*

Policy *Committee*

Wally Fox-Decent, Pat Jacobsen,
Margaret Day, Keith Ferbers,
Larry McLennan, *from January - September 30th, 2000,*
Ed Gallos, *from October 1, 2000.*

The Policy Committee was created under section 51.1(2) and (3) of *The Workers Compensation Act*. The Committee reviews and recommends changes to existing policy and initiates new policy through consultation with stakeholders of the WCB. It also serves as the Human Resources Committee of the Board.

Finance *Committee*

Wally Fox-Decent, Pat Jacobsen,
Barrie Simoneau, Bruno Zimmer,
Bruce Leckie *to September 30th, 2000,*
Dayna Hammond, *from October 1, 2000.*

The Finance Committee also serves as the Audit Committee of the Board. It was established to review the financial position of the WCB including the annual budget, assessment rates and related financial policies.

Service *Committee*

Wally Fox-Decent, Pat Jacobsen, Karen Naylor,
Larry McLennan *to May, 2000,*
Barbara Switzer *to September 30th,*
Sharon Seabourne *from June 16th, 2000,*
Neil Enns *from October 1, 2000,*
Barrie Simoneau, *May 1st to June 16th, 2000.*

The Service Committee assists the WCB's administration in accelerating and monitoring service improvements and recommending approval of funding under the WCB's Community Initiatives and Research Program.

Investment *Committee*

Wally Fox-Decent, Pat Jacobsen,
Cal Roberts, Pat Gannon
Advisors - Sherman Kreiner, Alan Howison

The Investment Committee was created under Section 95 of *The Workers Compensation Act* to regularly review WCB investments and provide clear, written direction for the investment portfolio. The investment committee is considering additional opportunities to invest in the Manitoba economy.

2000 Highlights

Holding the line on assessment rates, implementing a new claims management model, strengthening our administrative policies and reviewing our key processes to make them more effective all played a part in helping the WCB achieve its vision to build a safer and healthier Manitoba.

Assessment rates remain unchanged for third consecutive year

For the third consecutive year, the WCB has held the line on assessment rates for 2001 at $1.49 per $100 of assessable payroll. This is due mainly to good returns on WCB investments and to having one of the lowest administration costs per time loss claim in Canada. Ours is one of the lowest premium rates across the country, but the rising number of accidents threatens continuation of these low rates. Unless we work together and reduce the accident trend, the WCB will be unable to sustain our low rates.

Fortunately, there is growing recognition that workplace safety benefits everyone. In a survey conducted in October 2000, 97% of employers told us they believe they can make a difference in the safety of their workforce through effective prevention strategies.

Safer work environments have a positive impact on workers, their families and their lifestyles and improve productivity, well-being and job satisfaction. The benefits of prevention for employers include a healthy workforce, increasing profits, reducing WCB premiums and demonstrating leadership in workplace health and safety.

Administration costs remain second lowest across Canada

Despite the highest rates for injury occurrence, the Manitoba WCB has kept its administration expense per time loss claims at the second lowest across the country.

Claims assigned by industry sector

We have completely revamped our claims management services around industry sectors to get to know our clients and workplaces better. With the same staff members working on all claims coming out of one industry, we are gaining a better understanding of the injuries and their causes. Armed with this information, we are working more closely with employers, workers and community partners like Workplace Safety and Health to reduce the number of accidents by making workplaces safer.

Claims managed by full-service teams

When accidents or illnesses occur, the WCB believes well developed and managed programs and services can lessen the impact on workers, their families and their employers. Our claims management staff has been reshaped into full-service teams with one individual – an adjudicator or case manager – accountable to both the employer and the worker. This replaces the former process of moving a claim file from department to department as it progressed through our system.

Pricing system more accurately reflects employers' accident experience

What happens at the workplace has the biggest influence on what employers pay for workers compensation premiums. The new rate model developed in 2000 encourages the prevention of accidents by rewarding employers and industry sectors with good claims experience and charging more to those with higher claims costs.

Policies revised to ensure workers receive maximum benefit

The WCB is increasingly looking not only at loss of earnings, but all the supports necessary to get injured workers back to health and work. We thoroughly examined our administrative policies and made changes in 13 policy areas to ensure workers receive the maximum benefit allowed within our legislated framework.
In conducting our review, we looked for ways to promote the speedy return to health and work of injured workers and ways to remove barriers that may delay a worker's recovery.

Overpayments

The new policy provides WCB staff with more flexibility to exercise judgement in case of overpayment.

Hearing Loss

The new policy lowers the minimum threshold for an impairment award from 35 decibels to 25 decibels of hearing loss in each ear and, for the first time, recognizes the condition known as tinnitus. These changes not only recognize the full extent of impairment, but also reflect the generally recognized point at which impairment begins.

Spousal Rehabilitation

Changes were made to offer the surviving spouse of a fatally injured worker the chance to receive extended wage loss payments to age 65 instead of a lump sum payment when the claim is accepted. Also, it is now easier for the surviving spouse to participate in rehabilitation programs through the provision of net income replacement and the payment of certain additional costs arising from participation in the program.

Modified/Alternate Work

A clearer set of parameters have been developed for modified or alternate work with the accident employer. The new policy strengthens the role of the workplace in establishing transitional arrangements and clarifies the situations in which the WCB will become involved. The policy also describes the procedures used when a worker and an employer disagree on whether a worker should be placed in a modified work situation.

Average Earnings

The new policy improves the way average earnings are calculated for those who file income tax as self-employed. The new process better reflects the true loss of earnings of these claimants.

Prospective Earnings

The revised policy raises the eligibility of a youthful worker from 25 to 28 years of age at the time of the compensable injury, and accelerates the pace at which their average earnings are increased to the average industrial wage.

Net Average Earnings

The revised policy will parallel the income tax system where reasonable. It allows greater flexibility in the administrative method used to calculate net average earnings to better reflect the financial and personal situations of injured workers and their dependents. For example, the WCB now allows workers to claim spousal support and childcare payments, two tax deductions not previously allowed. This will more accurately reflect the true net earnings of these claimants.

Post-Accident Earnings

The four policies related to this issue have been revised to establish a consistent set of principles for calculating post-accident earnings for claims prior to and after January 1, 1992 (when revisions were made to The Workers Compensation Act). Benefits were improved in some circumstances through a revision to the formula used to calculate wage loss benefits.

Lump-Sum Commutations

The new policy expands opportunities for pre-1992 claimants on pension to convert their pensions to a lump sum payout.

Support for Daily Living

Four policies have been amalgamated into one and revised to lessen the impact of severe injuries on workers. Examples of support that may be provided include home and vehicle modifications, personal care attendants, and independent living and clothing allowances. In all cases, the WCB must determine what services or products injured workers reasonably need to lessen the impact of the workplace injury.

Medical Aid

Five policies were combined to more effectively administer medical aid benefits. In addition, improvements were made to the services provided to workers who need prosthetic devices.

Disclosure of Information-Employer Access

Employer access involves balancing the worker's right to privacy with the employer's right to sufficient information to allow meaningful participation in the compensation program. This policy creates a set of uniform criteria for consistent levels of disclosure of information to employers.

Expenses for Attendance at Appeal Hearings

The WCB will now pay wage loss to those claimants who attend Appeal Hearings.

Visit the WCB website at www.wcb.mb.ca for more information on all WCB policies.

Business processes under review to make WCB more efficient & user friendly

The sooner the WCB is made aware of an accident, the sooner we can ensure workers get the benefits and services they need to return to health and the sooner they can return to work.

A three pronged approach to improving the WCB's process of receiving and registering a claim was launched in 2000 with dramatic decreases in the time it takes to receive notification of an accident from healthcare providers.

Instead of mailing in reports, healthcare providers are now asked to fax in reports. New, streamlined forms were designed that are more conducive to faxing and a dedicated, secure fax server was set up to ensure the increased volume of faxes can be processed. An extensive Facts by Fax campaign including letters, faxes, advertisements, newsletters and personal visits to hospitals, clinics and professional associations proved to be very successful. Within two weeks, counts showed 62% of healthcare reports coming in by fax, compared to only 13% prior to implementation.

The next two phases scheduled for 2001 are to encourage workers to report claims by telephone and employers to provide us with claims information using the Internet.

Receiving and registering claims is the first of several key WCB business processes being taken apart and re-built to improve our service by making our interactions with our customers and stakeholders faster, easier and more effective.

Putting *Our* Vision *to work*

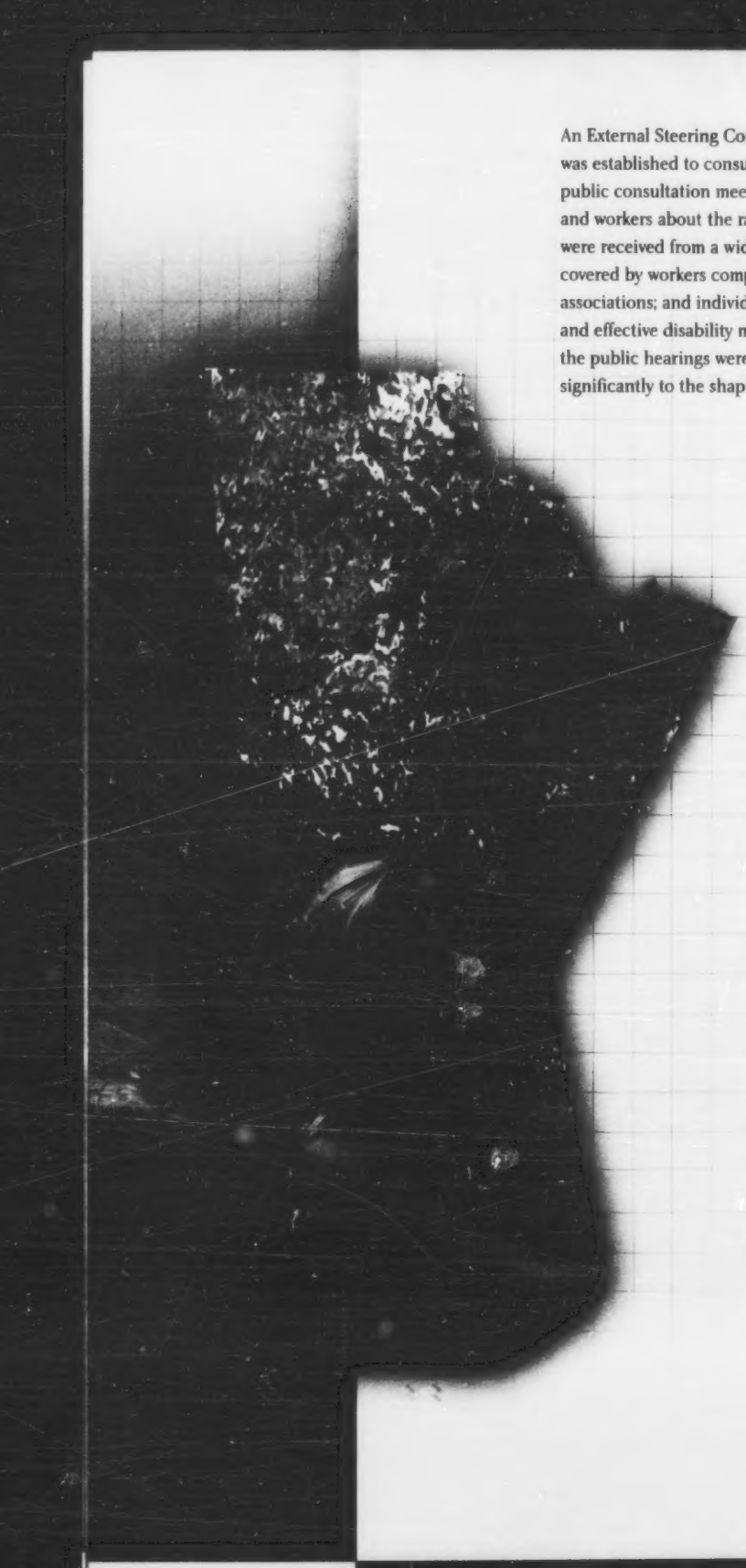
The WCB is undergoing a fundamental shift in focus, from being an agency that compensates workers for job-related injuries to an organization that, in addition to its traditional role, also promotes the prevention of workplace injuries and helps workers return to health and work more quickly. Two key initiatives were undertaken this past year to help achieve our goal for a safer and healthier Manitoba - the revision of our rate model and the implementation of the new claims management system.

New rate model

Since 1996, the average rate of assessment for the 23,000 Manitoba workplaces covered by the WCB has fallen by 35% to $1.49, one of the lowest rates in Canada. During the same period, however, total accepted claims have grown by 11.3% and claims costs and the duration of claims have also risen. Under the old rate model this poor experience was not always reflected in WCB assessment rates. The new model, which is experience rated, corrects that rating anomaly and provides incentives for businesses with few workplace accidents.

While the new model will not affect the total amount of revenue that the WCB needs to collect from employers in the form of assessments, it will greatly affect how much of that money will be collected from each employer.

The assessment model sets out the criteria, standards and formulas used to determine the injury risk among employers and to determine each employer's assessment rate. The assessment model is revenue neutral-it has no effect on the total revenue collected each year from the province's employers. The model is the tool used to determine how much will be collected, in the form of WCB assessments, from each employer. As well, the model has no effect on the benefits available to injured workers. Both the benefits and the money required to pay for them would be the same with either assessment model.



An External Steering Committee consisting of public, labour and employer representatives was established to consult on the rate model as it was being developed. In addition, extensive public consultation meetings were held throughout Manitoba to seek the views of employers and workers about the rate model. In all, the 24 written submissions and oral presentations were received from a wide variety of sources, including employers and workers who are covered by workers compensation; labour unions; professional, trade, industrial and business associations; and individuals or organizations with an interest in promoting workplace safety and effective disability management. The views, concerns and suggestions expressed during the public hearings were conveyed to the WCB Board of Directors and contributed significantly to the shaping of the new assessment model.

The new model draws much from the old, especially in its retention of the fundamental concept of experience rating. Employers with good safety records and lower claims costs will pay less than employers with poor safety records that increase claims costs.

In deciding to retain experience rating, the Board weighed the major advantages – the financial incentive for employers to improve workplace safety and the inherent fairness of assessing employers on the basis of their claims costs – against the drawback that assessment rates based on claims payments encourages claims suppression.

New Model Features

Direct claims cost expressed as a percentage of assessable earnings is the cornerstone of any experience-rating assessment model. Direct claims costs are payments for compensation, medical treatment and rehabilitation, and permanent disability awards made on a firm's injuries.
To calculate a measure of a firm's cost experience under the old model, the claim payments in the current year (even if those payments were generated by injuries occurring up to five years earlier) were divided by the firm's current payroll. This could end up inflating the assessments for firms with declining payrolls and deflating assessments for firms with expanding payrolls.

To eliminate this inequity, the new model calculates direct cost experience on the ratio of current claim payments to those of an average Class E employer with the same five-year payroll history. This produces what is called the Firm Cost Index.
The new rate model will calculate a Target Rate for each firm. The Firm Target Rate is not the actual assessment rate, but rather represents what the rate would have been if there were no lower and upper boundaries to an employer's rate, or no limits on annual rate increases or decreases.

The Firm Target Rate is also a measure of how high or low a firm's assessment rate could become if its experience remains consistent. This will give a strong and clear indication of the financial rewards for operating an injury-free workplace and of the financial penalties that will be incurred if workplace safety is ignored.

With the new model, employers have more opportunity to "control their own destiny" in terms of WCB costs with safer workplaces and fewer accidents. To reduce the number and severity of accidents in their workplaces the WCB has encouraged employers to:

- *work with the WCB case managers assigned to their firms, injured workers and union representatives to develop effective return to work plans; and*

- *check the WCB page at* www.wcb.mb.ca *for a listing of occupational health and safety consultants who may be able to help reduce WCB costs and make workplaces safer.*

New claims management system brings the WCB closer to the workplace

The WCB now has full service claims management teams dedicated to specific industry sectors that will work much closer with workers and employers. This new way of handling claims should help workers recover from their injuries and get back to work sooner. Under this new system, one individual from the team is accountable to both the worker and the employer.

Now, as soon as a claim is accepted, the claims management team can ensure wage loss benefits and treatment plans are organized at the same time rather than one after the other. The WCB's experience is that when workers are quickly assessed and treated, they return to work sooner. Workers will have one main contact at the WCB who will call them to make sure they understand what wage loss and medical aid benefits there are entitled to, what steps will be taken to help them recover and answer any other questions.

The WCB will also spend more time communicating and building relationships with employers, learning more about the type of work they do and how the jobs can affect accident rates and return to work. Our staff will help employers better understand the relationship between claims costs and WCB premium and how these can be managed. Working with several firms in the same industry, our staff can help identify best practices in accident prevention and disability management to reduce the frequency and severity of work-related injury and illness.

Since April 1999, when the new claims management system was planned, new jobs have been developed, 200 staff have taken more than 50,000 hours of training, new computer programs have been designed and financial and human resources systems have been modified.

The project was successfully piloted in the healthcare sector and then launched October 30, 2000. While there are still significant implementation challenges to overcome, the new claims management system has received widespread acceptance from both workers and employers.

Report of the Fair Practices Advocate

Role and Mandate

The Fair Practices Office was established to assist both injured workers and employers when they identify concerns arising out of fairness or natural justice. The creation of this safeguard gives a voice to those who feel compelled to make a complaint to an independent body. The mandate given to the Office authorizes the Fair Practices Advocate to access any information she feels is necessary to complete an investigation of a complaint from either an injured worker or an employer.

The Fair Practices Office is not a level of appeal. The levels of appeal are the Review Office, where the board may reconsider a previous decision, and the independent Appeal Commission. Unlike these bodies, the Fair Practices Office does not have the power to reverse, overturn or stay a decision.

Following an investigation the Fair Practices Advocate has the mandate to make recommendations for correction if it is determined that an action or decision of the WCB has been clearly wrong or clearly unreasonable.

Process

The process used by the Fair Practices Office is designed to allow for easy access by employers or injured workers. Most contact with the Office is by telephone. A staff person takes the call and does a complete intake of all the information relating to the enquiry. The matter is investigated and feedback is given to the complainant on all issues.

All issues that are determined to have merit are discussed with management staff. This allows management to rectify the complaint and to consider if the issue requires additional remedial action.

While the purpose of the Fair Practices Office is to receive and investigate complaints, the hard work of dedicated staff on behalf of injured workers and employers is commonly observed during this process.

Overall Enquiries 1996 - 2000

Year	2000	1999	1998	1997	1996
Number of Enquiries	808	848	850	963	1,079

Outcomes from this process can vary depending on the nature of the issue brought forward. Assistance given to the complainant typically takes one or more of the following forms:

- *increased efforts to obtain the information necessary to make an initial decision on the adjudication of a claim;*
- *further gathering of information in situations in which a decision has been made but potentially useful information has not been sought;*
- *recommendations if decisions are made that do not follow WCB legislation or policy;*
- *explanations to the complainant in instances where no remedy is warranted or available, as all complaints do not have merit;*
- *further explanation by the Administration when earlier communications have been unclear to the complainant or information has not been communicated;*
- *clarification or adjustment to documentation when it is inappropriate or not relevant to the WCB; or*
- *recommendations to the Administration when a decision has been clearly wrong or clearly unreasonable.*

Whatever the outcome of the complaint, callers to the Fair Practices Office provide a perspective that assists the Workers Compensation Board to examine itself and improve service to its clients. There are a number of positive effects that arise from the complaint process.

- *It can create a degree of empowerment and satisfaction for the complainant.*
- *It can contribute to the creation of an introspective organization that constantly evaluates its service through the eyes of those it serves.*
- *It can afford the organization the opportunity to correct a situation without requiring the complainant to go through a lengthy appeal process.*
- *It can help staff to assess situations that have created a problem for the complainant and learn from the experience.*
- *It can help line staff and management identify training needs.*
- *It can allow the organization to identify possible problem areas and, if indicated, further examine them through its other quality assurance mechanisms.*
- *It can allow the organization to analyze the trends in the complaint numbers, which are not in and of themselves statistically significant, and compare the results to trends in its own statistical measures.*

Enquiries by Type 1998 - 2000

Category descriptions:

- Communication issues deal with complaints where claimants feel they are not getting the information they need when they need it or in a way they understand it. Included are instances where claimants felt the tone of comments made by staff were inappropriate or disrespectful.
- •• This category captures all complaints where there is a disagreement related to claims management, benefit entitlement or termination of benefits.
- ••• This category describes issues where claimants waited longer than they thought appropriate. Typical are situations in which claimants may have waited for adjudication to be completed, benefit cheques, medical aid expense payments or medical aid authorization.
- •••• This category describes situations where a claimant or an employer is seeking information on legislation, board policy and procedure or claim status.

Financial Report

FINANCIAL REPORT 2000 FINANCIAL REPORT 2000

RS COMPENSATION

ERS COMPENSATION BOARD OF MANITOBA 2000 ANNUAL REPORT

FINANCIAL REPORT 2000 FINANCIAL

Management's Responsibility *for Financial Reporting*

The financial statements of the Workers Compensation Board of Manitoba were prepared by management, which is responsible for the integrity and fairness of the data presented, including significant accounting judgements and estimates. This responsibility includes selecting appropriate accounting principles consistent with generally accepted accounting principles in Canada. Financial information contained elsewhere in the annual report conforms to these financial statements.

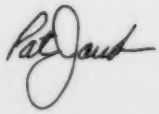
In discharging its responsibility for the integrity and fairness of the financial statements, management maintains the necessary internal controls designed to provide reasonable assurance that relevant and reliable financial information is produced and that assets are properly safeguarded. The Internal Auditor performs periodic audits designed to test the adequacy and consistency of the board's internal controls.

The Board of Directors is responsible for overseeing management in the performance of its financial reporting responsibilities and has approved the financial statements and other financial information included in the annual report.

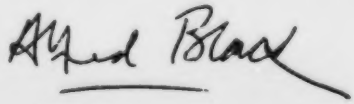
The Board of Directors is assisted in its responsibilities by the Finance Committee. This committee reviews and recommends approval of the financial statements, budgets and annual reports. The Finance Committee meets periodically with management, internal and external auditors and actuaries concerning internal controls and all other matters relating to financial reporting.

The firm of William M. Mercer Limited has been appointed as the independent consulting actuary to the board. Their role is to complete an independent review of the actuarial valuation of the benefit liabilities included in the financial statements of the board and to report thereon in accordance with accepted actuarial practices.

PricewaterhouseCoopers, the external auditors of the board, have performed an independent audit of the financial statements of the board in accordance with Canadian generally accepted auditing standards. The Auditors' Report outlines the scope of this independent audit and the opinion expressed.



Pat Jacobsen
President & CEO



Alfred Black
Vice President, Financial & Employer Services

2000 Management Discussion *and* Analysis

As an integral part of the Annual Report, the Management Discussion and Analysis provides further insights into the operations and financial position of the board.

The board operates under the authority of The Workers Compensation Act and is responsible, in accordance with the provisions of the Act, for administering the payment of benefits to injured workers and for levying and collecting assessment revenues in an amount sufficient to cover the current and future costs of workplace injuries. The board obtains its revenues from (i) premiums charged to Class E (general body) employers based on assessable payrolls; (ii) assessments from self-insured employers; and (iii) income from its investment portfolio.

The board receives no funding from the Government of Manitoba. It provides funding to the government to cover 95% of the costs of operating the Workplace Safety & Health division and 100% of the Worker Advisor Office.

The board insures approximately 70% of the workers in Manitoba, employed by approximately 23,400 registered employers.

2000 Financial *Highlights*

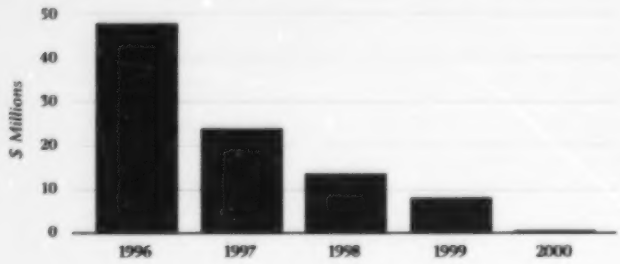
The board recorded an operating surplus of $461,000 in 2000 (1999, $8.5 million) which was allocated to the Rate Stabilization Fund Balance.

Total revenue grew by 8.0% in 2000 as a result of higher premium and investment revenues. Assessment revenue for Class E (general body) employers rose by 8.4% in 2000 due to increases in assessable payrolls. The board maintained the average assessment rate of $1.49 per $100 of assessable payroll after three successive years of rate decreases totalling 33%.

Investment revenue climbed almost 14% to $70.4 million in 2000 as significant market gains in late 1999 received recognition in 2000 under the board's five year investment income recognition policy. Continuing growth in the size of the portfolio helped to generate additional interest and dividend income.

Total claim costs incurred for 2000 were $157.5 million, $22.2 million (16.4%) more than in 1999. Included in the 2000 balance is a provision of $4.6 million for the cost of amendments to 13 policy areas, which provide fairer treatment of injured workers.

Operating Surplus



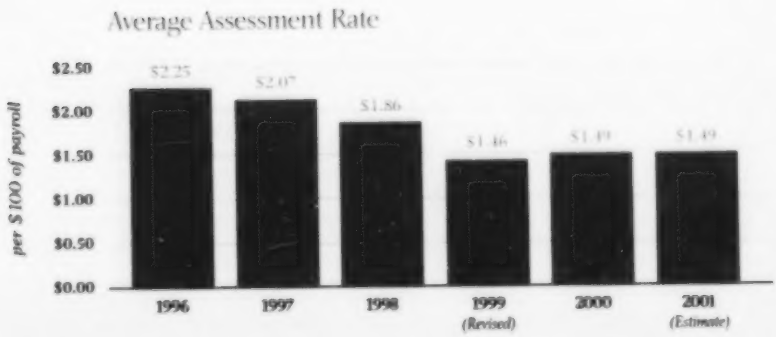
Fund Balances

After backing out adjustments to claims costs incurred for the funding of the policy amendments in 2000 and the spousal remarriage liabilities (1999, $11.1 million), total claims costs rose dramatically, i.e. by 22.6% in 2000 over 1999. In addition to a notable increase in the number of claims reported to the board in 2000, the board experienced significant increases in duration measures and medical aid costs. The average length of time that claimants received compensation payments (duration) increased by 13% over 1999. This increased both the actual payments made to claimants during the year and the provision for future costs to be incurred on today's injured workers.

Reflecting rapidly increasing healthcare costs, and the introduction of new technologies, the board's expenditures on medical aid grew by $3 million (11.5%) over the previous year.

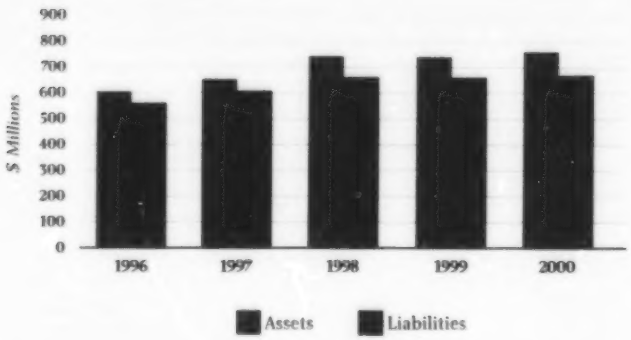
The operating surpluses for 2000 and 1999 may also be attributed to certain actuarial factors as follows:

($000)	2000	1999	Change	Percentage Change
Assessment revenue greater (less) than current year expenses	461	(6,596)	7,057	107%
Investment income in excess of liability requirements	21,300	13,500	7,800	58%
Lower (higher) actuarial liabilities than previously anticipated	(21,300)	1,600	(22,900)	(1,431%)
Operating surplus	461	8,504	(8,043)	(95%)



Balance *Sheet*

Assets and Liabilities



Assets

Cash

As a result of the reductions in assessment rates from 1996 to 1999, the cash flow generated by operations has substantially decreased, placing a heavy reliance on the returns generated by the investment portfolio. As such, and as a result of payments made to remarried surviving spouses in 1999 and 2000, the board's cash balances have been allowed to decrease to minimal levels. Periodic withdrawals are made from the investment portfolio to buttress operational cash flows. In addition, the board has arranged credit facilities with both its main banker and the Treasury Division of the Province of Manitoba to provide short-term loans to smooth out cash flow peaks and valleys; maximum borrowings during 2000 were $6.5 million (1999, $16 million).

Receivables

The vast majority of receivables relates to monies owed by employers for fourth quarter 2000 premiums. The balances outstanding are comparable to 1999 year-end balances.

Investments

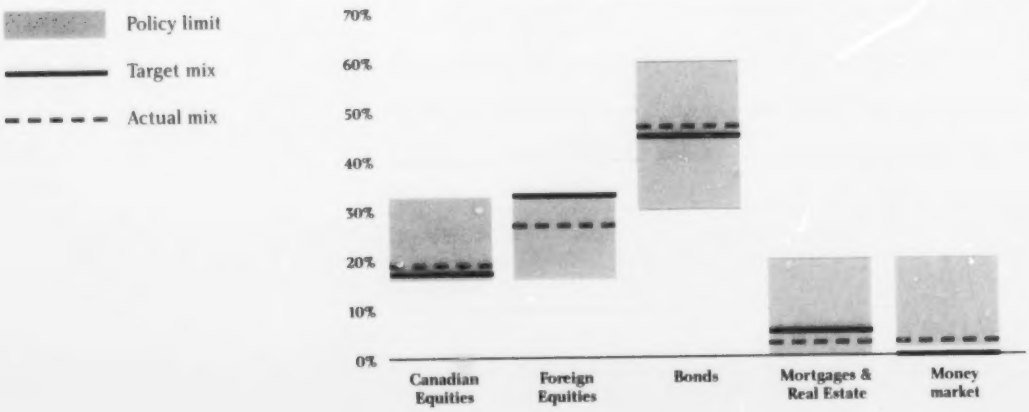
The targets set by the Investment Committee for the investment portfolio are:

- a minimum annual real rate of return of 4.0% effective for 2000 (1999, 3.5%).
- a ranking, based on investment performance, in the second quartile of like funds as measured annually and over several years; and
- specific benchmark targets by asset class, as follows:

Asset Class	Benchmark Targets (in $ Canadian)
Canadian equities	TSE 300
U.S. equities	S&P 500
Europe, Australia & Far East equities	EAFE Index
Emerging market equities	Morgan Stanley Emerging Markets Index
Bonds	Scotia McLeod Universe
Mortgages	Scotia McLeod Mortgage Index
Real Estate	Morguard Property Index
Money market	Scotia McLeod 91 day T-Bill Index

The board's investment portfolio is diversified among a variety of asset classes in order to optimize returns and minimize risks. The 2000 asset mix limits as defined by the Investment Policy and the actual asset mix based on market values at December 31, 2000 are as follows:

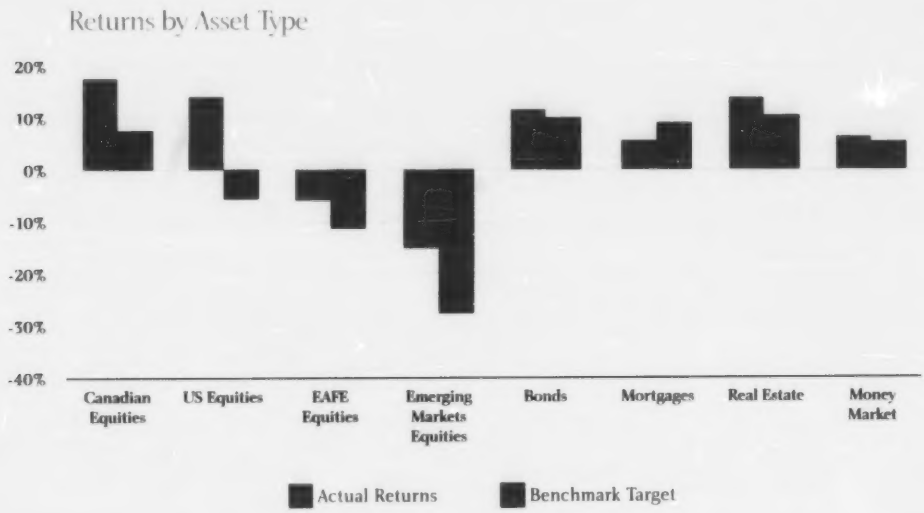
Target Asset Mix and Actual Asset Mix



The market value of the board's investments benefited from strong returns in the Canadian bond market and in North American equity markets. Note 6 to the Financial Statements indicates that the market value of the board's investment portfolio has increased since 1999 by $13 million (1.7%) to $780 million, notwithstanding $46 million in redemptions to fund board operations. Investment returns on a market basis averaged 8.1% in 2000 compared to 8.9% in 1999. This represents a real rate of return of 5.2% above the 2.9% rate of inflation and exceeds the Investment Policy target of a 4% real return. This achievement is also significantly above the actuarial expectation of a 7% market return.

	1996	1997	1998	1999	2000
Consumer Price Index	2.9%	0.7%	2.0%	2.3%	2.9%
Target – Consumer Price Index + premium (3.5% to 1999; 4.0% effective 2000)	6.4%	4.2%	5.5%	5.8%	6.9%
Market rate of return	16.5%	12.5%	8.0%	8.9%	8.1%
Earnings in excess of policy target	10.1%	8.3%	2.5%	3.1%	1.2%

The actual returns (on a market basis) can be seen on the following graph:



For financial statement purposes, the net book value of the board's investment portfolio reflects the partial deferral of realized and unrealized market gains and losses. These gains and losses are amortized to income over 60 months, consistent with life and long-term disability insurance industry practices. Despite the turbulence in the equity and bond markets and the withdrawal of $46 million from the portfolio to fund operations, the net book value of the portfolio still grew to $704 million, an increase of $27 million (4.0%) over 1999. Investment returns on a book value basis were 10.8% (1999, 9.4%).

Deferred Assessments

Under the provisions of The Workers Compensation Act, self-insured employers are entitled to defer payment of some future costs. In effect, these employers enjoy full pay-as-you-go status. In return for this status, the Act obligates the Government to honour these commitments or requires the participating self-insurers to provide guarantees or securities satisfactory to the board. The deferred assessment amount parallels accumulated future costs of claims. The account balance decreased by $3.5 million during 2000 as a result of experience gains for the future costs of claims from prior years.

Capital Assets

Additions to capital assets during 2000 totalled $3.6 million and were primarily concentrated in the (i) upgrading of information technology equipment and software, and (ii) system development activities. The system development projects included:

- a new rate setting model which will more appropriately assess premiums to the Class E employers;
- completion of enhancements to the new Employer Services Information System;
- system changes to support the sector, case management reorganization;
- the initiation of a new Human Resource Management System; and
- a direct deposit project which allows the board to pay long-term claimants, as well as suppliers, via direct deposit to their bank account.

There were no significant capital asset disposals during 2000.

Net book value at the end of 2000 was slightly higher than 1999 as capital acquisitions exceeded amortization by approximately $0.2 million. Amortization expense for 2000 was $3.4 million, a level considered normal in relation to the capital expenditures. The 1999 amortization expense of $4.3 million included one-time charges related to Year 2000 readiness activities.

Liabilities *and* Fund Balances

Payables and Accrued Liabilities

The principal items recorded under payables are accounts payable, accrued liabilities, funds held for claimant annuities, deposits from self-insured employers, and community initiatives and research program grants which are committed. Total payables have increased to $12.1 million, up 25% over 1999, due, in large measure, to the significant growth in the balance for claimant annuities. The annuity program was set up to assist claimants whose employer is not contributing to a pension plan while the employee is receiving wageloss benefits. The board contributes up to 5% of the claimant's benefits and the claimant is given the option to match this contribution. The annuity accumulates interest until the claimant reaches retirement. The balance in this account is expected to grow exponentially over the next decade.

Benefit Liabilities

Benefit liabilities grew by almost $25 million (3.8%) as set out in detail in Note 10 to the financial statements. Growth in future costs were primarily due to rising costs resulting from a significant jump in the duration of claims in 2000. On average, compensation claims were in pay for 13% longer than in the previous year causing the rise in claim costs. Higher claim volumes and rising medical costs and claimant wage levels also contributed to the larger liability balance.

Rate Stabilization Fund Balance

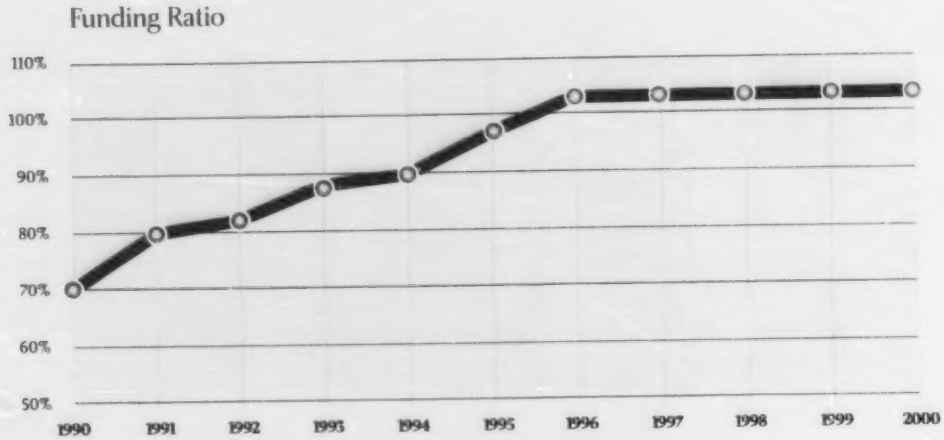
The Rate Stabilization Fund Balance grew to $57.6 million as the 2000 operating surplus of $461,000 was transferred to the fund. The fund's target balance is based on an adapted formula—the Minimum Continuing Capital and Surplus Requirements—from the Office of the Superintendent for Financial Institutions, Canada (OSFI). The use of this formula reduces the level of risk as the fund balance will now move in tandem with changes in size of the board's assets and liabilities. Based on this formula, the fund's target balance at the end of 2000 was $64 million, or $6.4 million more than the actual balance.

Accident Fund Balance

The Accident Fund Balance was unchanged at $20.0 million as the entire operating surplus was allocated to the Rate Stabilization Fund Balance. Effective for 2000, the Board of Directors approved a new funding policy which, like the Rate Stabilization Fund Balance, uses a modified OSFI-formula to establish a target balance from year to year. This floating target will be more responsive to changes in general business risks as it is based in part on premium and claims volumes. Accordingly, the target balance for the Accident Fund at the end of 2000 was $35.7 million.

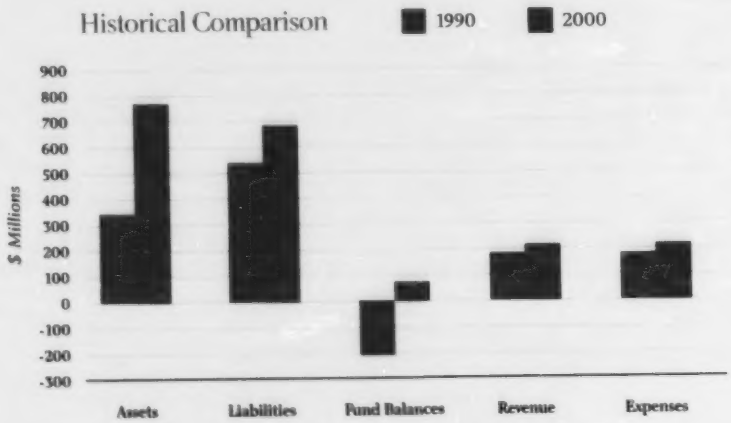
Summary

The board now has liabilities totalling $687 million and a Rate Stabilization Fund Balance of $57 million. These are covered by assets totalling $765 million. This means that the board's funding ratio remained relatively stable in 2000 at 102.7%. When the Rate Stabilization Fund Balance is grouped with the Accident Fund Balance instead of liabilities, the board's funding ratio is 111.3% at December 31, 2000. This is down slightly from one year earlier (111.7%).



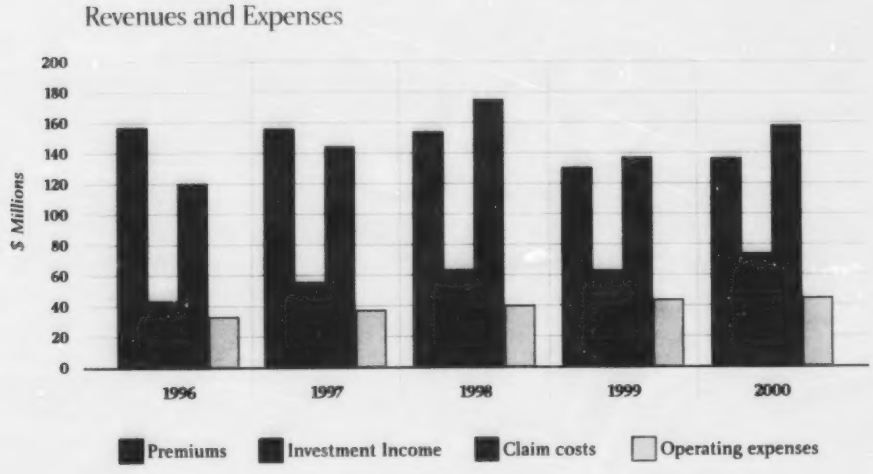
Funding ratio using AWCBC definition

The board has had dramatic growth in assets, liabilities and fund balances during the 1990's as shown in the following chart:



The board's fiscal health has improved tremendously over the past decade as the unfunded liability level of $232 million at the end of 1988 has been eliminated and replaced with fund balances totalling over $77 million today. This has allowed the board to reduce average assessment rates to among the lowest in Canada, and to make administrative policy changes that have improved benefits for claimants. The impact of these two initiatives means that the growth in assets and liabilities has now plateaued, as is reflected in the Five Year Plan which is published in conjunction with this Annual Report.

Statement *of* Operations



Revenue

Total revenue grew by $15.3 million (8.0%) from 1999, as a result of strong economic growth and rising investment returns.

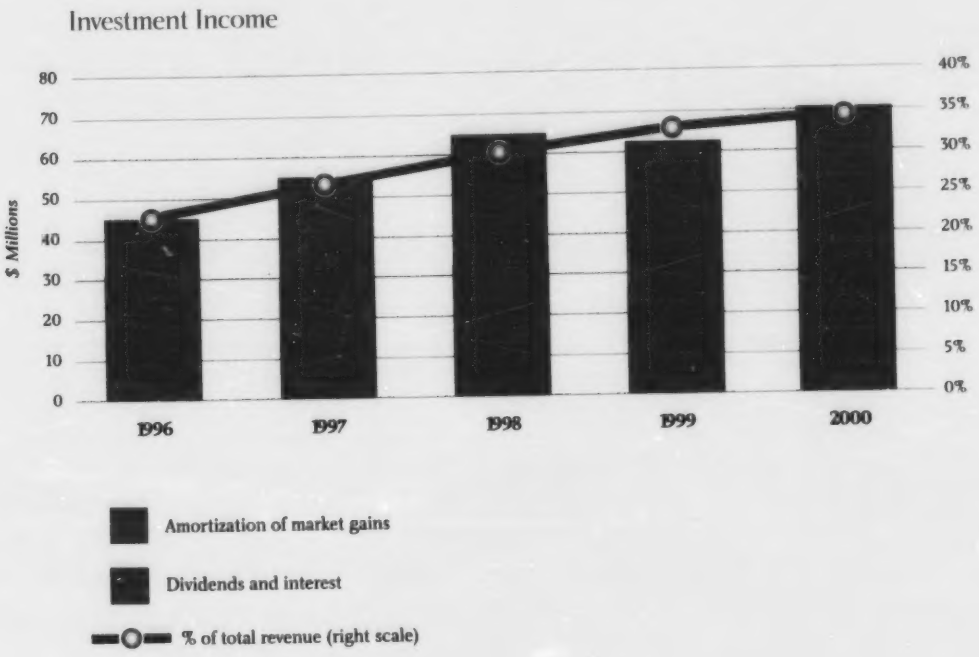
Premiums

During 2000, premium revenue climbed by almost $7 million (5.3%) after four consecutive years of declining revenue due to assessment rate reductions. A combination of factors influenced this reversal:

- the board set its rates at an average of $1.49 for both 1999 and 2000 based on budgeted assessable payroll levels by industry. Actual results for 1999 indicate changing payroll levels in various industries produced a final average assessment rate of $1.46. Preliminary results show an average rate for 2000 of slightly less than $1.49, resulting in higher assessment revenues;
- the Manitoba economy continued its exceptional growth of recent years, thus elevating employment by 2.2% and aggregate assessable payrolls by 5.7%; and
- self-insured employers experienced a $2.5 million decrease in direct assessments as a result of lower claim costs, as 1999 included the funding of payments to surviving spouses whose pension benefits had been terminated on remarriage.

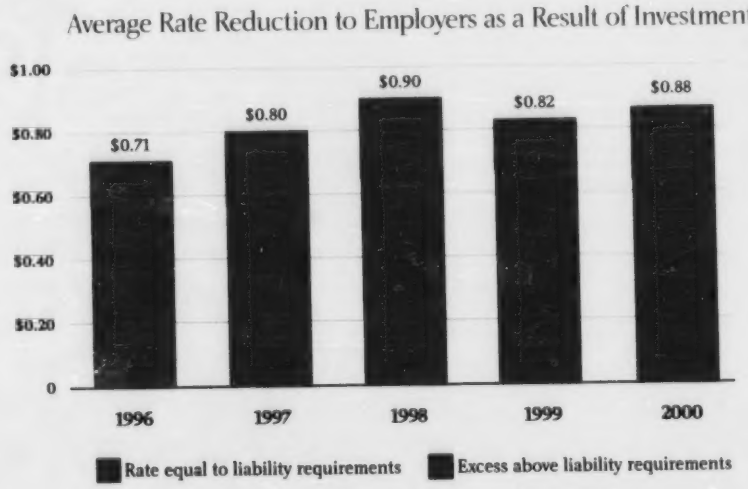
Investment Income

Since 1993, the year the board's investment portfolio became substantially diversified and more aggressively managed, the contribution of investment income to the board's revenues has increased quite substantially.



During the past five years, (1995 to 2000) investment income has grown by over $36 million (106%), while the net book value of the investment portfolio has grown by 45%. Investment income now contributes 34% of total revenue, compared to 18% for 1995. As the growth in the size of the investment portfolio has plateaued, it is projected that investment income will contribute approximately 25 to 30% of future revenue streams.

The escalating impact of investment revenue on employers is revealed on the following graph:

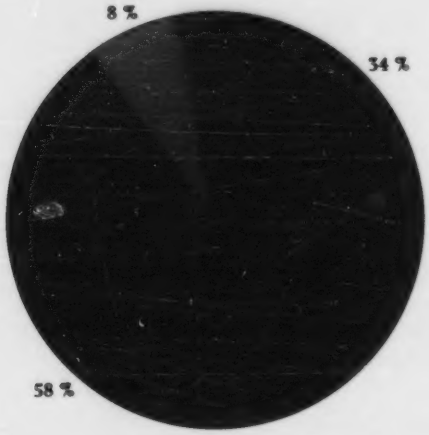


Note that recorded investment income reflects board accounting policies with respect to deferral and amortization of both realized and unrealized gains within the portfolio.

The investment market returns in 2000 were 8.1%. These returns exceeded the benchmark for the total fund by 3.8% and provided a real return in excess of 5%.

In 2000, two equity managers were added, one for the Canadian portfolio and one for the U.S. portfolio. The new managers both exceeded their targets for the portion of the year that they managed assets for the WCB. The management of the emerging markets portfolio was changed to a partnership of two managers. One manager makes investment decisions for the emerging markets portfolio while the other screens the proposed investments to ensure that the WCB is a socially responsible investor in the developing areas of the world.

All asset classes exceeded the relevant benchmarks, with significant positive returns achieved in all markets except non-North American equities. Canadian and U.S. equities outperformed the stock market indices most dramatically due primarily to limited exposure to the technology sector of the market.



2000 Revenues

- Class E premiums
- Self-insured premiums
- Investments

Expenses

Claim Costs Incurred

Claim costs incurred are as follows:

($000s)	Short-Term Disability	Long-Term Disability	Survivor Benefits	Healthcare Benefits	Rehabilitation Services	Total
2000	$55,080	$51,941	$9,514	$41,820	$(853)	$157,502
1999	44,159	34,829	21,364	30,857	4,055	135,264
Increase (decrease)	$10,921	$17,112	$(11,850)	$10,963	$(4,908)	$22,238

Claim costs are an estimate of the costs for compensable injuries that occurred in 2000, together with adjustments to prior years' estimates. These estimates take into account (i) claims which are in pay, (ii) reported but as yet unpaid claims, and (iii) unreported claims.

The 2000 estimated costs for unreported claims includes a liability for injuries with long latency periods, primarily occupational diseases and cumulative trauma disorders. This liability is recorded at $60.4 million (1999, $61.4 million) and is pro-rated between the general body of employers (Class E) and self-insured employers. The inclusion of the liability for the expected costs for long latency injuries is consistent with the board's funding policy to use a "level" funding standard, i.e. an allowance is set aside as these injuries are developing.

Total claim costs incurred in 2000 increased by $22.2 million (16.4%) to $157.5 million. After deducting the provision for surviving remarried spouses recorded in 1999 and the future cost of benefit policy enhancements approved by the Board of Directors during the year, total claim costs incurred for the current year grew by 23% over 1999, from $124.2 million to $152.9 million.

Total 2000 claim costs of $157.5 million are divided into costs incurred for the current year ($97.8 million) and prior years ($59.7 million). Costs incurred for prior years are adjustments to the actuarial estimates made in previous years and include the interest cost of discounted future cash flows and any pension surpluses that are achieved.

Included in claim costs is the impact of the review of the actuarial model which was conducted in 2000. These reviews occur every four to five years and include an update of various factors and tables utilized in calculating the amount of the benefit liability for the board's claimants. As a result of this review, a net gain of $3.6 million was recorded (0.5% of the total benefit liability) in the following categories:

	Gain (loss) in millions
i) long-term disability impairment awards	$ (9.0)
ii) survivor benefits	5.2
iii) healthcare benefits	(5.5)
iv) rehabilitation service provider	6.6
v) changes in administration expense percentages and other	6.3
	$ 3.6

An analysis of claims costs incurred by category follows:

- Short-term disability claim costs incurred, i.e. wage loss compensation for claims that have yet to medically plateau or stabilize, exceeded 1999 costs by 24.7%. This is consistent with the three factors that drive these costs:

i) the higher number of total time loss accidents reported in 2000 (up 8.3%),
ii) significantly higher claims duration (up to 13% depending on the measure of duration used), and
iii) a minor increase in claims costs per day (up 2%), which reflects increases in the average industrial wage experience for Manitoba.

- The long-term disability claim costs combine three different components, namely wage loss payments (made as part of rehabilitation programming), permanent impairment costs and the long latency provision. The increase in long-term disability claim costs incurred in 2000 of $17.1 million results from:

  i) rehabilitation wage loss costs which rose by $8 million in 2000. These increased costs are due, in large part, to a changing claims pattern with a much larger proportion of older, more expensive claims. Additional claims volume and higher costs per day also contributed to the increased claim costs.
  ii) changes to the actuarial model increased the board's liability for impairment awards by $9 million.
  iii) a moderate decline of $1 million in the liability for long latent occupational diseases.

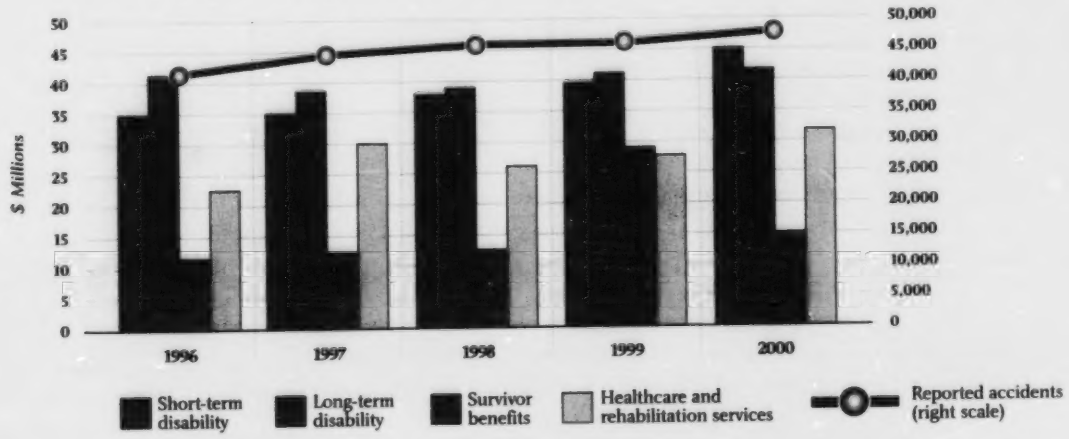
- The 2000 claim costs for survivor benefits decreased by $11.9 million as 1999 costs were elevated by the inclusion of $11.1 million in expenses for the benefits to surviving spouses who remarried. Also included in this year's expense is a $5.2 million credit resulting from actual indexation costs being lower than previously projected. A similar gain was realized in 1999.

- Healthcare benefit costs were up total of $11 million or 35.5%. Approximately one half of this increase reflects the growth in the number of reported time loss claims and inflationary pressures on the prices of medical aid supplies and services. The balance of the increased expense is the $5.5 million adjustment to the actuarial model for medical aid benefits to reflect a longer expected payment tail in the future.

- Claim costs incurred for rehabilitation services reflect third party service provider expenditures and are down $4.9 million or 121% from 1999. Higher claims volumes and costs were offset by a gain of $6.6 million due to the revised methodology used by the actuaries to calculate the future cost of this category.

The amount of *claim payments* made in 2000 decreased to $132.8 million from $137.3 million in 1999, a decrease of 3.3%. Included in the 1999 payments were $16 million in payments made to surviving spouses who had previously remarried. After removing payments to surviving spouses from the claims payments, the resulting 9.5% increase stems primarily from higher claims costs due to inflation and a longer average duration of payments for claimants. The following chart illustrates the five year trend in the major payment categories and the relationship to reported accidents.

Claim Payments vs Reported Accidents



Administration Expenses

Administration expenses totalled $37.7 million in 2000 which is an increase of $1.7 million (4.6%) over 1999. This includes:

- increases in salaries, benefits and training expenses, largely driven by staffing and training initiatives tied to the implementation of the new case management model and the reorganization along industry sector lines. Staff levels grew by 10 positions to a total of 433 permanent full-time positions at the end of 2000.
- despite the increases in data processing volumes, overall information technology service costs fell as a major service provider contract was successfully renegotiated at a lower rate.
- professional fees declined as a result of knowledge transfers initiated in 1999, which allowed the board to rely more extensively on its staff resources instead of external consultants.
- a smaller amortization charge as the charge for 1999 included the full amortization of all Year 2000 readiness costs.
- other than increased utility costs which drove up occupancy costs, the board was successful in reducing costs in the remaining expense categories through the development of a formal procurement strategy.

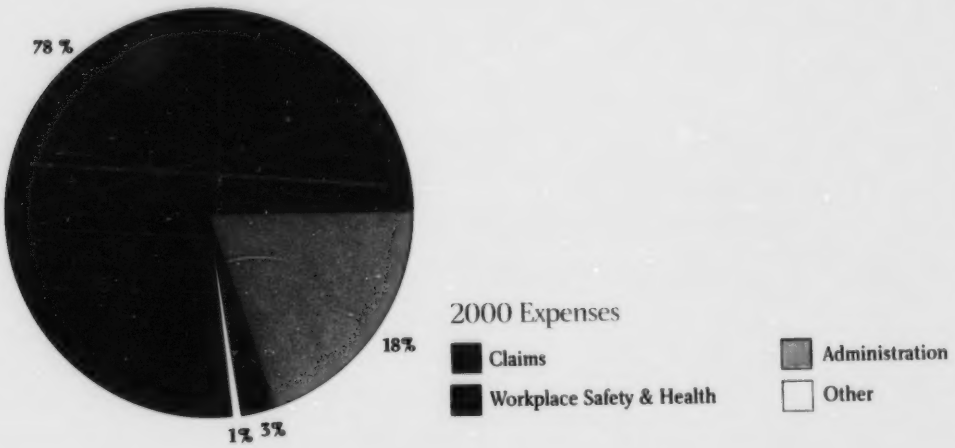
Community Initiatives and Research Program Grants

Eight projects totalling $975,000 were approved for research and education purposes under a program developed by the Board of Directors in 1997. This brings the total commitment since the inception of the program to just under $4 million for 53 projects.

Workplace Safety & Health Expenses

The Workers Compensation Act requires the board to pay the Province of Manitoba's consolidated revenue fund for services rendered by the Workplace Safety & Health division and the Worker Advisor Office of the Department of Labour, subject to statutory provisions which limit increases in the funding grant.

In 2000, workplace safety and health expenditures increased by $750,000 to $5.85 million to fund the hiring of additional safety officers by the Workplace Safety & Health division of the Government of Manitoba.



Operating Surplus

The operating surplus in 2000 was $461,000 (1999, $8.5 million), the smallest annual surplus since 1991. Despite the increased premium and investment revenue, the increases in claims costs due to longer duration and improved benefits resulted in an operating surplus that was only slightly better than break even.

In accordance with the board's funding policy, the entire operating surplus was transferred to the board's Rate Stabilization Fund Balance, lifting that fund balance to $57.6 million.

Statement *of* Cash Flows

During 2000, the organization had a small increase in cash of $2.7 million which compares favourably to the decrease of $22.7 million in 1999. This net increase consists of $6.2 million in cash used by operating activities offset by $8.9 million in cash provided by investing activities.

The $6.2 million used by operating activities in 2000 compares to $18.3 million of cash used by operations in the previous year, an improvement of $12.1 million. This improvement was caused by a number of factors:

i) higher assessment revenue due to growth in assessable payrolls and a slightly higher average assessment rate,
ii) higher investment income due to climbing short-term interest rates and a larger investment portfolio,
iii) the 1999 results contained $16 million for payouts to surviving spouses who had remarried which was not repeated in 2000, and
iv) escalating expenditures for claimant benefits and administrative expenditures.

Cash provided by investing activities increased as the board withdrew greater amounts from the investment portfolio in 2000.

This trend, of low cash balances and reliance on investment income to fund operations, is expected to continue in the future.

Operational *Statistics*

The statistical figures reflect year-end reporting based on information available at the time this Annual Report was produced. During the months following year-end, employers provide their final assessable payroll data to the board. As a consequence, revised figures based on the final assessable payroll information are published in the following year's Annual Report. These revised figures are identified with an "r".

New Claims

The total number of new claims reported was up over the prior year by 3.4%. The number of accepted time loss claims grew by about 4.2%, reflecting a growing proportion of time loss claims.

The number of elapsed days from accident to first payment decreased approximately 3.1% for routine claims. Days to first payment for all claims also fell by 4.9%.

Marginal differences were observed in most other measures reported in this sub-section such as the elapsed time from an accident to the first decision (whether a payment results or not) and from the date the claim was reported to the board to the first payment, reflecting the challenges the board faces as it strives to improve service to its stakeholders.

New Claims

	2000	1999
1. Claims Reported		
Time Loss	21,249	19,615
No Time Loss	25,924	26,001
Fatalities	48	36
Total	**47,221**	**45,652**
2. Claims Accepted or Unadjudicated		
Time Loss	20,054	19,243
No Time Loss	20,052	19,911
Fatalities	27	21
Pension	66	58
Total	**40,199**	**39,233**
3. Claims Disallowed		
Referred	61	44
No Coverage	991	923
Initially Not Accepted	1,145	962
Abandoned	4,825	4,490
Total	**7,022**	**6,419**
4. Covered Population (000's) Frequency of Time Loss Claims		
Total Covered Population (Frequency)	371 (5.4%)	366 (5.3%) r
Mining (Frequency)	5 (3.8%)	5 (2.7%) r
Manufacturing (Frequency)	60 (12.9%)	62 (12.2%) r
Construction (Frequency)	19 (9.2%)	21 (8.5%) r
Transportation & Storage (Frequency)	17 (6.0%)	18 (5.9%) r
Healthcare (Frequency)	37 (5.7%)	33 (5.7%) r
5. Average Time from Accident to First Payment		
(In calendar days; excluding recurrences)		
Routine Claims *	25.3	26.1
All Claims	35.2	37.0
6. Average Time from Accident to First Decision		
(In calendar days; excluding recurrences)		
Routine Claims *	26.9	25.2
All Claims	50.2	51.1
7. Average Time from Reporting to First Payment		
(In calendar days; excluding recurrences)		
Routine Claims *	16.7	17.2
All Claims	22.3	22.7
8. Reconsiderations Decided		
Review Office (% of settled claims)	1,013 (2.5%)	1,084 (2.8%)
% Upheld	70%	69%
% Overturned (including partial)	30%	31%

** Routine claims constitute about 85% of the total*

Active Claims

The number of short-term disability claims under administration at year-end increased by 6.6% due to rising reported claims and the longer retention of files by the case manager due to the new sector, case management structure.

The number of long-term claims decreased by 8.7% largely due to a pension commutation program which offered lump sum settlements to pensioners receiving less than $50 per month. A total of 357 pensioners elected to receive the settlement.

The number of active survivor claims decreased slightly by 0.3%.

Active rehabilitation claims at December 31, 2000 were down 9.2% from 1999 as, under the new case management structure, case managers have additional responsibility to work with the claimants, which reduces transfers of files to rehabilitation.

Active Claims at Year-End	2000	1999
1. Active, Short-Term Disability Claims	2,924	2,742
2. Active, Long-Term Disability Claims		
Life Pensions (excluding survivors)	3,749	4,200
Supplements (SAC's)	503	537
Earnings Loss (Rehabilitation income maintenance)	412	372
Total	**4,664**	**5,109**
3. Active Survivor Claims		
Spouse	524	530
Children	407	403
Other	7	8
Total	**938**	**941**
4. Active Rehabilitation Claims	916	1,009
5. Total Active Claims	**9,442**	**9,801**

New Long-Term Claims

Fewer life pensions and more lump sum payments were awarded in 2000, resulting in approximately a 5.9% increase in the volume of awards made. The average impairment award rate decreased by 0.3% from 9.7% to 9.4%; when full (100%) disability and death awards are excluded, the percentages are 9.3% (2000) and 9.6% (1999).

The number of new entrants to rehabilitation decreased by 29.5%, reflecting the change in claim processing under the new sector, case management structure.

New Long-Term Claims	2000	1999
1. New Impairment Awards		
Life Pensions	266	299
Lump Sum	560	486
Supplements	50	42
Total	**876**	**827**
2. Average New Impairment Awards		
Including 100% disability; excluding death	9.4%	9.7%
Excluding 100% disability, or death	9.3%	9.6%
3. New Entrants to Rehabilitation Programs	316	448
4. Propensity to Award Long-Term Benefits *(% becoming long-term)*	3.0%	3.9%
5. Average New Long-Term Earnings Loss *(% of pre-accident earnings)*	78.2%	79.1%

Duration/Severity

Duration on claims can be measured in a variety of ways, of which three have been selected for interprovincial comparisons. The first of these, *duration on settled claims*, measures actual duration when a claim is settled. It does not include accumulating duration for claims that have not yet been settled as of year-end. By this measure, duration increased by 5.2% between the two years.

The second measure, the *90-day window technique*, measures duration in the first 90 days after the accident, whether the claim has been settled or not. Obviously, this measure does not take into account most long-term claims. By this measure, duration increased by 3.1% between the two years.

Thirdly, the *composite measure*, counts actual duration for settled claims, as well as accumulated duration for claims which have not yet been settled. This measure is often viewed as being the most representative of actual practice. It may be calculated for the current year as well as all accumulated years. It is reported below for only Class E claims. Using this measure, duration increased. For example, it grew by 8.3% for all wage loss cases (i.e. compensation and rehabilitation) for all years. It also increased, for claims involving compensation only, from 35.3 to 38.9 days, up 10.2%.

Duration/Severity *(in days)*	2000	1999
1. Average Duration of Claims (Compensation)		
Settled Claims	24.4	23.2
90-day Window	16.6	16.1
Composite Measure (current)*	20.9	19.5
Composite Measure (all years)*	38.9	35.3
2. Average Duration of Claims (All Wage Loss)		
Composite Measure (current)*	21.0	19.5
Composite Measure (all years)*	44.3	40.9

** self-insured claims excluded*

Assessments

These statistics complement those appearing in the statistics section later in the Annual Report.

Assessments Statistics	2000	1999
1. Assessable Payroll ($ millions)	$7,998	$7,567 r
2. Rates		
Average	1.49	1.46 r
Lowest	0.19	0.20
Highest	12.77	11.10
3. Employers		
Registered	23,400	22,962
New	2,708	2,770
4. Write-offs as % of Revenue	0.3%	0.2%

Staffing

The board's staffing complement at December 31 is as follows:

Staffing Complement	2000	1999
Approved permanent full-time positions	433	423
Healthcare Professionals (part-time contract)	31	32
Healthcare Professionals (full-time contract)	2	2

Financial Statistics

	2000		1999	
1. Expense and Percentages				
Claim costs - current year	$97,757,000	(48%)	$105,454,000	(59%)
Claim costs - prior years	59,745,000	(30%)	29,810,000	(17%)
Operating expenses	44,907,000	(22%)	42,445,000	(24%)
2. Administration Expenses *(AWCBC defn..)*				
Expenses	$35,394,000		$33,140,000	
Administration cost per accepted time loss claim	1,765		1,722	
3. Maximum Weekly Compensation *(for a two parent, two child family)*	$602.90		$580.20	
4. Claim Costs Incurred on a fully-funded basis				
Total (all years)	$157,502,000		$135,264,000	
Total (current year)	97,757,000		105,454,000	
Per accepted time loss claim (all years) - Note 1	7,854		7,029	
Per accepted time loss claim (current year)	4,875		5,480	
5. Ratios				
Premiums per covered worker - Note 2	$366		$353 r	
Claim costs incurred per covered worker - Note 2	$425		$370 r	
Claim costs incurred per $100 of assessable payroll - Note 3	$1.97		$1.79 r	
Benefit liabilities expressed as a multiple of benefit payments - Note 4	5.1		4.7	
Workplace Safety & Health costs per $100 of assessable payroll	$0.07		$0.07	
6. Insurance Ratios *(see discussion following)*				
Direct loss	118.9%		108.8% r	
Overall	99.8%		95.4% r	
7. Book Rate of Return on Investments	10.8%		9.4%	
8. Market Rate of Return on Investments	8.1%		8.9%	
9. Funding Ratio *(AWCBC defn.)*	102.7%		102.8%	

Note 1

The claim costs incurred per accepted time loss claim increased by $825. This calculation, which divides total claim costs incurred for all years by accepted time loss claims in 2000, conforms to the approach recommended by the AWCBC for reporting to the Financial Executives Institute of Canada. The increase in the 2000 average cost is due mainly to increased claim costs consistent with the increases noted in the duration statistics.

Note 2

Premiums per covered worker and claim costs incurred per covered worker represent two measures of the economic cost of insurance for the policy holders and beneficiaries. Premiums per covered worker increased by 3.7% to $366 reflecting the higher average assessment rate. Claim costs per covered worker also increased by 14.9% over 1999, to $425 per worker. This measure is higher than 1999 because of increases in the duration of claim payments. In the future, it is expected that claim costs per covered worker will continue to exceed premiums per worker, indicating the positive contribution of investment income.

Notes are continued on the next page.

Note 3

Claim costs incurred per $100 of assessable payroll is one important indicator of sustainable long-term assessment rates in the absence of investment earnings. In 2000, this indicator increased to $1.97 from 1999's value of $1.79, a 10.0% increase, largely due to increased duration.

Note 4

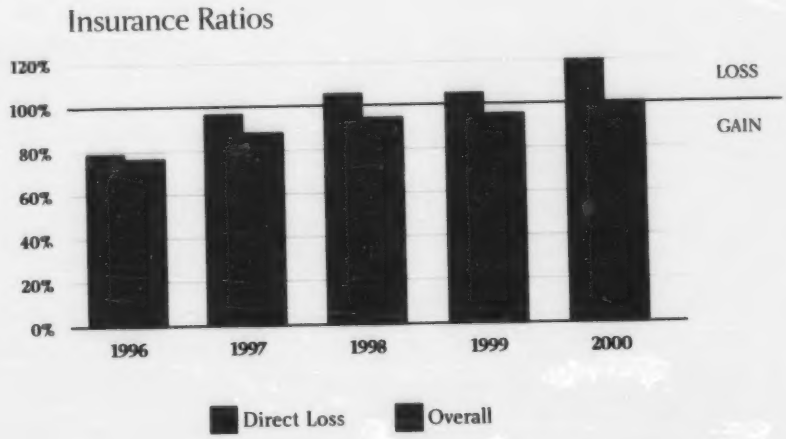
Benefit liabilities as a multiple of claims payments made is a measure of the average "tail" or longevity of the liabilities. For 2000 the multiple is 5.1 times (1999 - 4.7 times). The 1999 ratio was depressed due to the inclusion of the $16 million of payments to surviving spouses.

Insurance Ratios

The financial operations of the board can be summarized by two ratios commonly used by the insurance industry. The direct loss ratio compares claim costs incurred with premium revenue; when this ratio exceeds 100%, the WCB loses money on claims as it pays out more on claims than it collects in premiums. The overall ratio is a measure of the board's experience taking into account investment income and operating overheads. When the overall ratio exceeds 100%, the board loses money resulting in an operating deficit.

Of the two ratios, the overall ratio is considered the most telling statistic as it utilizes all revenue and expense categories and, thus, it is the most indicative of the board's total operations. Although the direct loss ratio produces values over 100%, the critical overall ratio is below 100%, signalling that the board has a modest operating surplus and affirming that investment income makes a valuable contribution to that operating surplus.

The upward trend in both ratios from 1996 to 1999 was the result of recording the long latency and surviving spouse benefit liabilities. 2000 results showed a movement in both ratios to levels that are expected to be maintained in future years. Based on the 2001 budget and the Five Year Plan, it is projected that the direct loss ratio will be in a band from 100 to 110% while the overall ratio is expected to show values very close to 100%. This mirrors the board's expectations of sustainable, but not excessive, operating surpluses.



Statement of Actuarial Opinion

with respect to the

Present Value of Future Benefit Liabilities of the Workers Compensation Board of Manitoba based on an actuarial valuation as at December 31, 2000

We have completed an actuarial valuation of the benefit liabilities for insured and self-insured employers under the Workers Compensation Act of Manitoba as at December 31, 2000. The purpose of the valuation is to provide adequate and appropriate estimates of the present value of future benefit obligations for inclusion in the board's 2000 financial statements. The benefit liabilities reflect payments that will be made in future years as a result of accidents or exposures that occurred on or before December 31, 2000. We have estimated these liabilities to be $675.1 million as at December 31, 2000.

The board's benefit liabilities include the actuarial present value at December 31, 2000 of:

- wage loss benefits,
- disability pensions,
- survivor benefits,
- health care benefits, and
- rehabilitation benefits.

We have performed the analysis and calculations for these components of the benefit liabilities.

The board's benefit liabilities also include provisions for the following items which have been calculated based on analysis performed by the board using methods that we consider to be reasonable:

- the present value of future claims administration costs the board estimates will be required for payment of these benefits, and

- the present value of the cost of benefits for future long latency claims presently in a latency period, proportionate to the period of latency that has passed.

Our valuation was based on the provisions of the Workers Compensation Act and amendments made to the Act as of December 31, 2000, and the current practices and administration procedures of the Workers Compensation Board. The actuarial methods used for the valuation reflect the board's historical claims experience. The methods used to estimate the present value of benefits have mostly been retained from the prior valuation with some modifications that are described fully in the actuarial report. The approximate effect of these modifications combined with the effect of other changes to the actuarial basis is shown below.

Future investment earnings are projected at 7 percent. Where benefits are indexed to price inflation, a 4 percent rate has been used to project investment earnings in excess of benefit indexation. Where benefits are indexed to wage inflation, a 3 percent rate has been used to project investment earnings in excess of indexation. A 3 percent rate has also been used to project investment earnings in excess of future inflationary increases in health care benefits and rehabilitation service provider benefits.

Complete information regarding our actuarial valuation is provided in our valuation report to the board dated February 2001.

The balance sheet from the board's December 31, 2000 financial statements shows rate stabilization fund and accident fund balances totalling $77.6 million, a net increase of $0.5 million since December 31, 1999. The major components contributing to the change in fund balances during 2000 are shown on the next page. This reconciliation of the board's fund balances

is based on the calculations described in this report, information shown on the board's financial statements with respect to assessment revenues and investment income, and benefit payment data supplied by the board.

The following table shows the reconciliation of the fund balances for 2000 and the two prior years.

($ Millions)

	1998	1999	2000
Total fund balances at beginning of year	$ 53.9	$ 68.6	$ 77.1
Plus:			
Expected investment income on the fund balances	3.8	4.8	5.4
Experience gains (losses) resulting from:			
- investment earnings above the valuation interest rate	19.9	13.5	21.3
- prior years' claims experience	7.3	1.6	(21.3)
- current year's claims experience	24.1	(8.1)	(6.9)
Gains resulting from changes to the actuarial basis	1.0	5.9	3.6
Addition for future long latency claims and surviving spouse benefits	(41.3)	(10.0)	0.0
Gains (losses) due to other factors	(0.1)	0.8	(1.6)
Total fund balances at end of year	$ 68.6	$ 77.1	$ 77.6
Comprised of: Rate stabilization fund balance	$ 48.6	$ 57.1	$ 57.6
Accident fund balance	$ 20.0	$ 20.0	$ 20.0

We have relied on the accuracy and completeness of the data supplied by the board. Where possible, we have compared the data with prior years' data to identify any inconsistencies.

In our opinion,

- the data is sufficient and reliable for the purpose of the valuation;
- the assumptions made for the valuation are appropriate for the purpose of the valuation;
- the methods employed are consistent with sound actuarial principles for the purpose of the valuation.

The valuation report on which this certificate is based has been prepared and the opinions given in accordance with accepted actuarial practices.

Yours truly,

WILLIAM M. MERCER LIMITED

A. Douglas Poapst, F.S.A., F.C.I.A.

February 27, 2001

Auditors' *Report*

TO THE WORKERS COMPENSATION BOARD OF MANITOBA

We have audited the balance sheet of the Workers Compensation Board of Manitoba as at December 31, 2000 and the statements of operations, changes in fund balances and cash flows for the year then ended. These financial statements are the responsibility of the board's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the board as at December 31, 2000 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

PricewaterhouseCoopers LLP

PricewaterhouseCoopers LLP
Chartered Accountants
Winnipeg, Manitoba
February 27, 2001

Balance Sheet

December 31, 2000

	2000 ($000s)	1999 ($000s)
ASSETS		
Cash (Note 4)	$ 1,500	$ (1,210)
Receivables (Note 5)	21,881	20,823
Investment portfolio (Note 6)	704,353	677,312
Deferred assessments	23,348	26,805
Capital assets (Note 7)	13,665	13,493
	$ 764,747	$ 737,223
LIABILITIES AND FUND BALANCES		
Payables and accrued liabilities (Note 8)	$ 12,080	$ 9,664
Benefit liabilities (Note 10)	675,084	650,437
Total liabilities	687,164	660,101
Rate stabilization fund balance (Note 11)	57,565	57,104
Accident fund balance (Note 11)	20,018	20,018
	$ 764,747	$ 737,223

Signed on behalf of the Board

Wally Fox-Decent
Chairperson, Board of Directors

Dayna Hammond
Finance Committee of the Board of Directors

The accompanying notes are an integral part of the financial statements.

Statement of Operations

Year Ended December 31, 2000

	2000 ($000s)	1999 ($000s)
REVENUE		
Premiums - Class E employers	$ 119,582	$ 110,328
Premiums - Self-insured employers	16,388	18,824
Total premium revenue	135,970	129,152
Investment income required to support actuarially determined benefit liabilities (Note 6)	49,057	48,333
Investment income exceeding actuarial requirement (Note 6)	21,300	13,500
Investment income	70,357	61,833
Total revenue	206,327	190,985
EXPENSES		
Claim costs incurred (Note 10)	157,502	135,264
Operating expenses (Note 12)	44,907	42,445
Total expenses	202,409	177,709
Operating surplus before deferred assessments	3,918	13,276
Decrease in deferred assessments	(3,457)	(4,772)
OPERATING SURPLUS	$ 461	$ 8,504

Statement of Changes in Fund Balances

Year Ended December 31, 2000

RATE STABILIZATION FUND BALANCE		
Balance at beginning of year	$ 57,104	$ 48,600
Allocation from operating surplus	461	8,504
Balance at end of year	$ 57,565	$ 57,104
ACCIDENT FUND BALANCE		
Balance at beginning of year	$ 20,018	$ 20,018
Allocation from operating surplus	0	0
Balance at end of year	$ 20,018	$ 20,018

The accompanying notes are an integral part of the financial statements.

Statement of Cash Flows

Year Ended December 31, 2000

	2000 ($000s)	1999 ($000s)
OPERATING CASH FLOWS		
Premiums from employers	$ 135,199	$ 129,773
Investment revenue	33,633	26,138
Payments to claimants or third parties on their behalf	(132,855)	(137,301)
Purchases of administrative goods and services	(42,134)	(36,953)
Net cash used by operating activities	(6,157)	(18,343)
INVESTING CASH FLOWS		
Proceeds on disposal of investments	1,115,843	1,102,002
Purchase of investments	(1,103,415)	(1,102,432)
Capital asset acquisitions, net of disposals	(3,561)	(3,975)
Net cash provided (used) by investing activities	8,867	(4,405)
Net increase (decrease) in cash	2,710	(22,748)
Cash at beginning of year	(1,210)	21,538
Cash at end of year (Note 4)	$ 1,500	$ (1,210)

The accompanying notes are an integral part of the financial statements.

Notes to the Financial Statements

Year ended December 31, 2000

1. Nature of Operations

The Workers Compensation Board of Manitoba (the board) operates under the authority of the Workers Compensation Act. The board is responsible, in accordance with the provisions of the Act for:

- administering payments to injured workers and suppliers of services to injured workers;
- levying and collecting premiums from established classes of employers in amounts sufficient to cover the current and future costs of existing claims; and
- investing surplus funds.

An independent Workers Compensation Appeal Commission is established under the Act to make final rulings on any appeals pertaining to the board's assessment or benefits decisions.

The board's mission is to provide superior compensation services to Manitoba workers and employers in a manner that is sensitive, responsive and effective in order to minimize the impact of workplace injuries.

The board's funding policy is intended to ensure that fiduciary responsibilities are carried out in accordance with the Act and that annual influences do not unduly distort the funding process. The board is committed to operating on a fully-funded basis to a level-funding standard. Full funding requires that current employers pay for the current and future cost of existing compensable injuries and their administration, rather than future generations of employers paying for those injuries. Under level funding, the cost of claims with lengthy latency periods is funded in a level fashion over the worker's period of exposure to the elements which lead to the injury or disease.

2. Significant Accounting Policies

These financial statements have been prepared in accordance with generally accepted accounting principles in Canada, which requires the board to make estimates and assumptions that affect reported amounts of assets, liabilities, revenues and expenses. Actual results could differ from those estimates. The board's significant accounting policies are as follows:

Investments

Short-term investments are carried at cost. The remaining investments are recorded at cost adjusted toward market value using the moving average market method. Unrealized and realized gains and losses are deferred and amortized on a straight-line basis over 60 months. Interest and dividend income are recognized in the period earned.

Deferred assessments

Deferred assessments represent the board's estimate of premiums which will be received in the future from the self-insured employers to fund the future costs of existing claims that have arisen from their employees. The deferred assessments may be secured by irrevocable letters of credit or other suitable forms of guarantee.

Capital assets

Capital assets are stated at cost less accumulated amortization. Capital assets are amortized on a straight-line basis over their estimated useful lives, as follows:

Computer equipment	3 - 5 years
Systems development	3 - 5 years
Furniture, fixtures and equipment	5 years
Building renovations	10 years
Building	40 years

Employee future benefits

The cost of providing pension and other post-employment benefits to employees is recorded as an expense in the period in which employees' services are rendered. The corridor approach is used to record actuarial gains and losses for post employment benefits other than pensions. For employee pensions, actuarial gains and losses are amortized over the expected average remaining service life of active employees covered by the plan, beginning in the year following identification.

Benefit liabilities

The board's independent consulting actuary conducts a review of and reports on the benefit liabilities of the board at each year-end. The benefit liabilities represent the actuarial present value of all future benefit payments expected to be made for claims or injuries which occurred in the current fiscal year or in any prior year. The benefit liabilities include provision for all benefits provided by current legislation, policies and/or administrative practices in respect of existing claims and provisions for the future expenses of administering the existing claims. The figures are estimates made from current information in accordance with procedures prescribed by the Canadian Institute of Actuaries.

Premium revenue

The operations of the board are categorized, in accordance with the Act, into Class E (general employers pool) and several classes of self-insured employers. Employers registered within Class E are subject to collective liability, and assessment premiums are determined by applying applicable industry assessment rates to the employers' reported payrolls for the current year.

Self-insured employers, principally government bodies and railways and their subsidiaries, are subject to individual responsibility for costs attributable to claims arising from their employees, as well as administration expenses incurred on behalf of the self-insured employers.

Foreign currency translation

Assets and liabilities, with the exception of investments, denominated in foreign currency are translated into Canadian dollars at the exchange rate in effect at the balance sheet date. The foreign currency exchange gains and losses for investments are recorded in the same manner as the related investment gains, losses, revenues or expenses.

3. Change in Accounting Policy

Beginning in 2000, the board changed its accounting policy for employee future benefits, based on the new CICA accounting standard "Employee Future Benefits". Post-employment benefits other than pensions were previously recorded as an expense when paid. Pension benefits were previously recorded as an expense when contributions were paid. Under the new policy, the cost of both of these benefits is charged to expense in the period in which employees' services are rendered. This change has been applied prospectively from January 1, 2000, and the transitional asset (pensions) and transitional liability (other post-employment benefits) determined as at that date are being amortized to operations over the expected average remaining service life of active employees, being 15 years.

4. Cash

	2000 ($000s)	1999 ($000s)
Money market instruments	$ 21	$ 102
Bank balances	3,465	959
Cheques issued and outstanding	(1,986)	(2,271)
	$ 1,500	$ (1,210)

The board has established an operating line of credit with its principal banker in the amount of $6,000,000. Advances on the line of credit bear interest at the bank's prime interest rate. The board has also established a revolving credit facility with the Treasury Division of the Province of Manitoba in the amount of $40,000,000. Loan advances bear interest at the Province's preferred lending rate. Both credit facilities are unsecured.

5. Receivables

Premiums for Class E employers	$ 17,272	$ 15,957
Allowance for doubtful accounts	(1,841)	(1,690)
	15,431	14,267
Prepaid employee pension plan costs	56	-
Premiums for self-insured employers	2,260	2,220
Mortgages	2,290	2,294
Sundry	1,844	2,042
	$ 21,881	$ 20,823

Mortgages receivable bear interest at rates ranging from 6.0% to 7.0% per annum and are due in 2001 and 2003.

6. Investment Portfolio

The book value and the estimated fair value (market value) of the investments are:

	2000				1999			
	Book Value ($000s)	Estimated Fair Value ($000s)	Average Term to Maturity (years)	Market Rate of Return	Book Value ($000s)	Estimated Fair Value ($000s)	Average Term to Maturity (years)	Market Rate of Return
Cash and short-term investments	$ 26,808	$ 26,808	0.2	5.7%	$ 55,699	$55,699	0.1	4.8%
Bonds								
Government of Canada	164,645	167,208	-	-	160,853	151,599	-	-
Provincial	83,270	84,743	-	-	94,772	88,499	-	-
Corporate	110,512	110,982	-	-	78,078	74,636	-	-
	358,427	362,933	10.1	11.2%	333,703	314,734	8.9	(2.4%)
Mortgages	8,372	8,229	2.7	5.5%	9,555	9,664	3.4	6.8%
Real estate	17,489	17,459		12.8%	7,568	7,786	-	10.8%
Equities								
Canadian	163,479	154,330	-	17.6%	155,376	154,452	-	11.6%
U.S.	84,763	87,023	-	14.4%	46,135	45,241	-	7.9%
Europe, Australia and Far East	116,047	115,158	-	(5.9%)	126,692	173,467	-	33.5%
Emerging markets	8,272	8,033	-	(15.8%)	4,810	5,832	-	47.5%
	372,561	364,544	-	8.0%	333,013	378,992	-	21.6%
Total	783,657	$ 779,973	-	8.1%	739,538	$766,875	-	8.9%
Deferred realized gains	(79,304)				(62,226)			
Net book value of investments	$ 704,353				$ 677,312			

Reconciliations of the changes for the year in the deferred unrealized and realized gains (losses) balances are as follows:

	2000 ($000s)	1999 ($000s)
Deferred Unrealized Gains (Losses)		
Balance, beginning of year	$ 27,337	$ 2,317
Unrealized net gains (losses) for the year	(21,425)	32,694
	5,912	35,011
Amortization during year	(9,596)	(7,674)
Balance, end of year	$ (3,684)	$ 27,337
Deferred Realized Gains		
Balance, beginning of year	$ 62,226	$ 89,394
Realized net gains for the year	47,754	853
	109,980	90,247
Amortization during year	(30,676)	(28,021)
Balance, end of year	$ 79,304	$ 62,226
Investment Income		
Investment income was derived from the following sources:		
Cash and short-term investments	$ 3,180	$ 2,975
Bonds	22,537	20,886
Mortgages	711	740
Real estate	1,399	1,555
Canadian equities	2,118	699
Foreign equities	3,754	1,731
Amortization of deferred unrealized gains	9,596	7,674
Amortization of deferred realized gains	30,676	28,021
Loan interest	(65)	(208)
Expenses	(3,549)	(2,240)
Investment income	$ 70,357	$ 61,833

Based on the 7% discount rate (1999 – 7%) used to actuarially determine the benefit liabilities, the required investment return on average investment assets is $49,057,000 (1999 - $48,333,000). Total investment income of $70,357,000 (1999 - $61,833,000) exceeded the actuarial requirement by $21,300,000 (1999 - $13,500,000). The analysis of investment income presented in the Statement of Operations has been disclosed for informational purposes. This provides a comparison of the return on investments required to support benefit liabilities and the excess of actual returns over this amount.

Market risk

The board invests in publicly and privately traded equities and bonds available on domestic and foreign exchanges. These securities are affected by market changes and fluctuations. The board does not use derivative financial instruments to alter the effects of these market changes and fluctuations.

Credit risk management

Credit exposure on fixed income securities arises from the possibility that the issuer of an instrument fails to meet its obligation to make interest payments and repay principal. Of the fixed income assets in the investment portfolio, 96% (1999 – 95%) have at least an A credit rating. The board does not anticipate that any borrowers will fail to meet their obligations.

Securities lending

The board may lend, for fee income, any of its investments to third parties, provided the loans are secured by cash or readily marketable securities having a market value of at least 105% of the market amount of the investment instruments borrowed. As of December 31, 2000 secured loans amounted to $75,769,174 (1999 -$63,628,000).

Foreign exchange risk management

The board has certain investments denominated in foreign currencies. During 2000 the board did not undertake hedging strategies for the currency risk of foreign investments and currency fluctuations influenced short-term returns. These fluctuations are not expected to affect the long-term position of the investment portfolio.

Interest rate risk management

Fluctuations in interest rates are managed by actively controlling the duration of the fixed income portfolio. The table at the beginning of this note discloses the remaining term to maturity of the board's fixed term investments.

7. Capital Assets

($000s)	Cost	Accumulated Amortization	2000 Net Book Value	1999 Net Book Value
Computer equipment	$11,947	$8,833	$3,114	$ 4,346
Systems development projects	7,683	4,796	2,887	1,439
Furniture, fixtures and equipment	2,358	1,940	418	293
Building renovations	3,081	806	2,275	2,473
Building and land	5,082	111	4,971	4,942
	$30,151	$16,486	$13,665	$13,493

8. Payables and Accrued Liabilities

	2000 ($000s)	1999 ($000s)
Accounts payable and accrued liabilities	$ 3,214	$ 3,119
Claimant annuities payable	3,256	2,258
Community Initiatives and Research Program grants	1,815	1,521
Deposits from self-insured employers	1,384	1,243
Employee vacation entitlements	931	531
Other payables	1,298	992
Sick leave plan	182	-
	$ 12,080	$ 9,664

9. Employee Future Benefits

The board has a defined benefit plan that provides pension benefits to employees based on length of service and highest average earnings. The board also has a benefit plan that provides for a payment of accumulated sick leave credits to employees that meet established criteria upon termination or retirement.

Information about the board's employee benefit plans as at December 31, is as follows:

	Pension Plan		Sick Leave Plan	
($000s)	**2000**	**1999**	**2000**	**1999**
Fair value of plan assets	$ 42,728	$ 38,672	$ -	-
Accrued benefit obligation	40,278	36,326	1,514	-
Funded status – plan surplus (deficit)	$ 2,450	$ 2,346	$ (1,514)	-
Accrued benefit asset (liability)	$ 56	-	$ (182)	-

As the board has restricted access to the pension plan surplus of $2,346,000 (actuarially determined as at January 1, 2000), the board has determined an expected future benefit of $675,000 existed at the date of adoption of the standard and it is this amount that is being amortized to operations.

While the obligation to payout sick leave credits is unfunded in the sense that the board does not hold segregated assets to fund the obligation, the board itself has sufficient assets to support its liabilities.

The significant actuarial assumptions adopted in measuring the board's accrued benefit obligations are:

	Pension Plan		Sick Leave Plan	
	2000	**1999**	**2000**	**1999**
Discount rate	7.0%	6.5%	7.0%	n.a.
Expected long term rate of return on plan assets	7.5%	6.5%	7.0%	n.a.
Rate of compensation increase	5.0%	5.0%	2.75%	n.a.
Expected average remaining service life (in years)	15	17	15	n.a.

Other information about the board's employee benefit plans is as follows:

	Pension Plan		Sick Leave Plan	
($000s)	**2000**	**1999**	**2000**	**1999**
Plan expense	$1,177	$1,083	$ 276	-
Employer contributions	1,233	1,085	-	-
Employee contributions	1,035	918	-	-
Benefits paid	1,511	1,181	94	-

10. Benefit Liabilities

An analysis of the components of and changes in benefit liabilities is as follows:

($000s)	2000						1999
	Short-Term Disability	Long-Term Disability	Survivor Benefits	Healthcare Benefits	Rehabilitation Services	Total	Total
Balance at beginning of year	$71,560	$343,533	$157,389	$56,095	$21,860	$650,437	$652,474
Add: Claim costs incurred							
Current year	59,052	(136)	7,948	26,868	4,025	97,757	105,454
Prior years	(3,972)	52,077	1,566	14,952	(4,878)	59,745	29,810
	55,080	51,941	9,514	41,820	(853)	157,502	135,264
Less: Claim payments made							
Current year	22,796	309	293	12,021	58	35,477	33,053
Prior years	22,143	41,037	14,618	16,200	3,380	97,378	104,248
	44,939	41,346	14,911	28,221	3,438	132,855	137,301
Balance at end of year	$81,701	$354,128	$151,992	$69,694	$17,569	$675,084	$650,437

The liability for short-term disability claims is an estimate of future wage loss payments for claims that have yet to medically plateau or stabilize. The long-term disability liability includes estimated future wage loss payments for those claims that have medically plateaued and stabilized, and estimated future pension payments. The liability for survivor benefits is composed of estimated future pension payments and other services provided to survivors of those who have lost their lives as a result of workplace accidents. Healthcare liabilities are the estimated future medical costs for existing claims. The liability for rehabilitation services is composed of the estimated cost of future rehabilitation services which are supplied externally to the board.

Included in long-term disability is the board's liability, in the amount of $60,417,000 (1999 - $61,417,000) for the future cost of claims relating to certain latent occupational diseases which may have occurred in the current year or prior years, but which may not be recognized and reported for a number of years due to the extended latency periods of such diseases.

Also included in benefit liabilities is a provision in the amount of $39,325,000 (1999 - $40,989,000) for the future cost of administering existing claims.

The actuarial present value of future benefit payments reflects management's long-term estimates of economic and actuarial assumptions and methods, which are based upon past experience and modified for current trends. As these assumptions may change over time to reflect underlying conditions, it is possible that such changes could cause a material change in the actuarial present value of the future payments. The fair value for benefit liabilities is not readily determinable.

11. Fund Balances

The rate stabilization fund balance protects the board from the risk that a catastrophic event, causing either an increase in the value of the liabilities or a decrease in the value of assets, could unfairly burden Class E employers and potentially cause the accident fund balance to become unfunded or prompt the board to consider exceptional increases in assessment rates.

The accident fund balance protects the board and its stakeholders from general business risks and is collectively attributable to the Class E employers.

12. Operating Expenses

	2000 ($000s)	1999 ($000s)
Salaries, employee benefits and training	$ 26,166	$ 22,628
Information technology service fees	2,383	2,691
Professional fees	1,887	2,365
Occupancy costs	1,614	1,448
Office supplies and services	1,088	1,351
Communications	1,016	1,168
Donations	121	106
Amortization of capital assets	3,389	4,247
Administrative expenses	37,664	36,004
Recoveries from the Government of Canada	(522)	(502)
Recoveries from the Province of Manitoba	-	(116)
Community Initiatives and Research Program grants	975	1,000
Appeal Commission	931	950
Workplace Safety and Health, and other (Note 13)	5,859	5,109
Total operating expenses	$ 44,907	$ 42,445

Of the total operating expenses, $3,326,000 (1999 - $3,413,000) is allocated to the self-insured employers based on the current year's transaction volumes.

The board administers the Government Employees Compensation Act program for the Government of Canada. Until June 30, 1999, the board fully administered The Criminal Injuries Compensation Act for the Province of Manitoba. As of July 1, 1999, the board provides administrative assistance, relating to medical opinions and appeal services, for the Province of Manitoba relating to criminal injury claims. The operation of these programs is reflected only to the extent of the recoveries of administration expenses.

During 2000, the board approved 8 grants to fund research and education projects, totalling $975,000, that will benefit both injured workers and employers (1999 - 9 grants totalling $1,000,000).

13. Related Party Transactions

Pursuant to The Workplace Safety and Health Act, the Province may pay the expenses incurred in the administration of that Act out of the consolidated fund and may, subsequently, recover such portion as it may determine from the class funds under The Workers Compensation Act. For 2000, the amount charged to operations under this provision is $5,093,000 (1999 - $4,343,000).

Also, under Section 84.(1) of The Workers Compensation Act, the Province may pay the costs incurred in respect of worker advisors and may recover them from the class funds. For 2000, the amount charged to operations under this provision is $766,000 (1999 - $766,000).

In addition to the legislated obligations referred to above, included in these financial statements are amounts resulting from routine operating transactions conducted at prevailing market prices with various provincial government controlled ministries, agencies and Crown corporations with which the board may be considered related. The provincial government is also a self-insured employer under The Workers Compensation Act. Account balances resulting from these transactions are included in the financial statements and are settled on normal trade terms.

Included in the board's investment portfolio are guaranteed debentures issued by the Province of Manitoba, in the amount of $21,439,000 (1999 - $22,225,000).

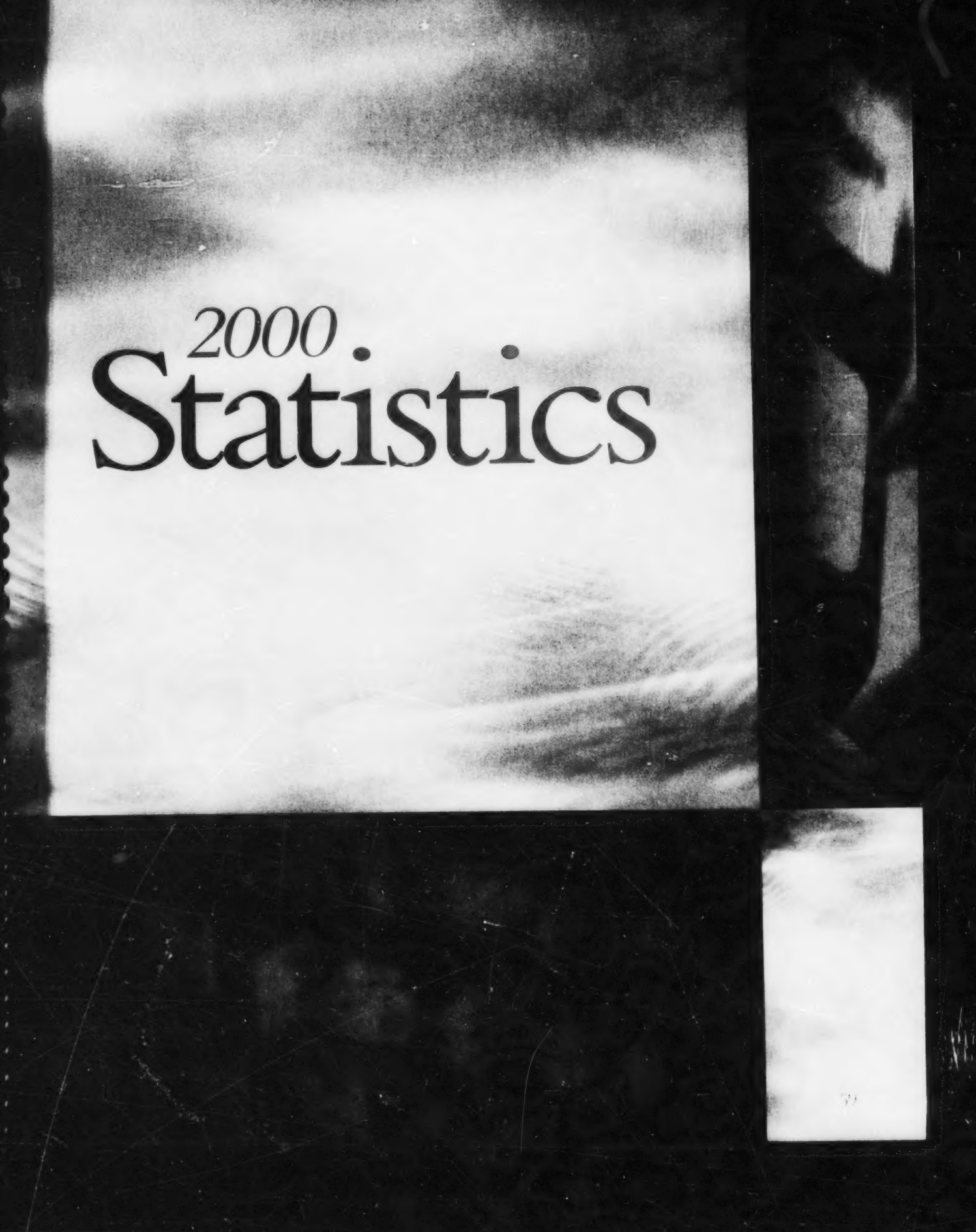
14. Benefit Liabilities for Self-Insured Employers

Note 10 contains a complete description of the components of the board's benefit liabilities for all employers. An analysis of the portion relating to the self-insured employers is as follows:

	2000						1999
($000s)	Short-Term Disability	Long-Term Disability	Survivor Benefits	Healthcare Benefits	Rehabilitation Services	Total	Total
Balance at beginning of year	$6,325	$36,673	$27,935	$6,888	$1,817	$79,638	$81,658
Add: Claim costs incurred							
Current year	4,416	18	884	3,071	213	8,602	11,265
Prior years	(414)	5,444	1,790	588	(677)	6,731	4,176
	4,002	5,462	2,674	3,659	(464)	15,333	15,441
Less: Claim payments made							
Current year	2,142	7	37	1,032	2	3,220	3,700
Prior years	2,188	4,921	3,080	2,363	259	12,811	13,761
	4,330	4,928	3,117	3,395	261	16,031	17,461
Balance at end of year	$5,997	$37,207	$27,492	$7,152	$1,092	$78,940	$79,638

Included in the premiums and claim costs are payments in the amount of $2,675,000 (1999 - $2,077,000) made by self-insured employers directly to claimants on the board's behalf. These amounts are reported to the board for inclusion in these financial statements.

Included in the benefit liabilities balance is $6,254,000 (1999 - $6,505,000) for the self-insured employers' share of the long latent occupational disease liability; and $3,438,000 (1999 - $3,890,000) for the future cost of administering existing claims.


2000
Statistics

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Claims Services *Statistics*

1 Claims Statistics

	1993	1994	1995	1996	1997	1998	1999	2000
Claims								
Current year claims registered during year	36,204	40,352	40,647	39,896	41,953	44,296	43,927	45,327
Prior year claims registered during year	1,377	1,652	1,731	1,639	1,878	1,703	1,725	1,894
Claim files settled								
Medical Aid Only	13,923	13,303	14,986	14,039	14,039	15,822	15,125	14,952
No Cost Claims	4,883	4,509	4,526	4,333	4,391	4,752	4,820	4,706
Time loss Claims	16,218	17,789	18,344	16,144	17,327	18,385	19,800	18,598
Claims Initially Rejected	878	521	785	738	914	821	907	902
Claims Referred	5,272	4,173	4,777	4,570	5,392	5,605	5,742	5,938

2 Pension Benefits

	1993	1994	1995	1996	1997	1998	1999	2000
Permanently disabled	4,734	4,659	4,558	4,475	4,429	4,322	4,200	3,749
Widow(er)s	548	539	524	513	506	497	530	524
Children	326	332	342	345	348	360	403	407
Other dependents	8	8	5	8	7	6	8	7

Figures

1 Cause *of* Accident

Time loss Accidents Only/2000 • Not Elsewhere Classified - n.e.c. • Unspecified - uns

Cause of Accident	#	%
Overexertion in lifting	3286	17.33
Bending, climbing, crawling, reaching, twisting	2393	12.62
Fall to floor, walkway, or other surface	1020	5.38
Struck by falling object	1018	5.37
Overexertion in pulling or pushing objects	857	4.52
Struck by slipping handheld object	813	4.29
Struck against stationary object	787	4.15
Slipping on something	577	3.04
Rubbed or abraded by foreign matter in eye	571	3.01
Struck against moving object	518	2.73
Compressed/pinched by rolling, sliding/shifting obj.	463	2.44
Repetitive placing,/moving objects, except tools	360	1.90
Contact with hot objects or substances	329	1.74
Struck by object, n.e.c.	327	1.72
Overexertion, n.e.c.	309	1.63
Fall onto or against objects	299	1.58
Bodily reaction, n.e.c.	283	1.49
Overexertion in carrying, turning, or wielding	280	1.48
Caught in running equipment or machinery	280	1.48
Struck against object, n.e.c.	201	1.06
Fall down stairs or steps	200	1.05
Contact with skin or other exposed tissue	193	1.02
Repetitive motion, n.e.c.	189	1.00
Fall from nonmoving vehicle	185	0.98
Tripping over something	165	0.87

Cause of Accident	#	%
Fall to lower level, n.e.c.	153	0.81
Fall from ladder	149	0.79
Struck by or slammed in swinging door or gate	146	0.77
Repetitive use of tools	143	0.75
Caught in/compressed by equip./obj., n.e.c.	133	0.70
Struck by discharged object or substance	132	0.70
Struck by dislodged flying object, particle	131	0.69
Exposure to welding light	106	0.56
Slip, trip, loss of balance—without fall	103	0.54
Struck by rolling, sliding obj. on floor	100	0.53
Hitting, kicking, beating	82	0.43
Struck by swinging or slipping object, n.e.c.	75	0.40
Over exertion in throwing objects	74	0.39
Assaults and violent acts by person(s), n.e.c.	70	0.37
Standing	66	0.35
Stepping in a hole	63	0.33
Expos. to traumatic/stressful event, n.e.c.	60	0.32
Inhalation in open or nonconfined space	59	0.31
Walking—without other incident	51	0.27
Fall from scaffold, staging	49	0.26
Stepped on object	48	0.25
Typing or key entry	44	0.23
Over exertion, uns	41	0.22
Jack-knifed or overturned—no collision	40	0.21
Rubbed or jarred by other machine or equip.	40	0.21

2 Region *of* Body Injured

All reported accidents, not specifically rejected/2000

Region of Body Injured	#	%
Hand	9262	23.25
Lower Spine	6000	15.06
Multiple Injuries	5938	14.90
Eye(s)	3598	9.03
Lower Arm	3511	8.81
Lower Leg	3377	8.48
Shoulder	1527	3.83
Foot	1356	3.40
Miscellaneous	1189	2.98
Thorax	925	2.32
Head	863	2.17
Abdomen	474	1.19
Neck	386	0.97
Cardio/Respiratory	326	0.82
Dorsal spine	249	0.62
Upper Leg	242	0.61
Hearing	229	0.57
Pelvis	180	0.45
Upper Arm	142	0.36
Industrial Disease	68	0.17

3 Nature *of* Injuries

Time loss Claims/2000 • Not Elsewhere Classified - n.e.c. • Unspecified - uns

Diagnosis	#	%
Sprains, strains, tears, uns	7783	41.05
Bruises, contusions	1774	9.36
Cuts, lacerations	1767	9.32
Fractures	719	3.79
Multiple traumatic injuries and disorders, uns	703	3.71
Back pain, hurt back	632	3.33
Foreign bodies (superficial splinters, chips)	618	3.26
Crushing injuries	482	2.54
Tendonitis	341	1.80
Soreness, pain, hurt, except the back	339	1.79
Punctures, except bites	301	1.59
Traumatic inj. to muscles, joints, etc. uns	181	0.95
Sprains and bruises	159	0.84
Heat burns, scalds, uns	156	0.82
Spasms or tremors, n.e.c.	152	0.80
Carpal tunnel syndrome	139	0.73
Dislocations	127	0.67
Second-degree heat burns, scalds	122	0.64
Inguinal hernia	111	0.59
Epicondylitis	111	0.59
Surface wounds and bruises, uns	110	0.58
Traumatic tendonitis	108	0.57
Rotator cuff tear	106	0.56
Welder's flash	103	0.54
Other poisonings and toxic effects, n.e.c.	99	0.52
Cuts, abrasions, bruises	93	0.49
Abrasions, scratches	91	0.48
Amputations, fingertip	85	0.45
Inflammation & irritation of joints, tendons, muscles,uns	85	0.45
Chemical burns, uns	78	0.41
Facet syndrome	75	0.40
Anxiety, stress, neurotic disorders, uns	71	0.37
Rotator cuff syndrome	71	0.37
Fractures and other injuries	69	0.36
Oth combinations of traumatic inj. & disorders, n.e.c.	58	0.31
Herniated disc, including slipped & ruptured disc	58	0.31
Sciatica	55	0.29
Concussions	51	0.27
Traumatic bursitis	48	0.25
Dermatitis, uns	45	0.24
Multiple traumatic injuries and disorders with fractures	44	0.23
Nonclassifiable	36	0.19
Burns, uns	33	0.17
Avulsions	33	0.17
Deafness, hearing loss or impairment	33	0.17
Tenosynovitis	30	0.16
Other injuries to muscles, tendons, joints, etc., uns	29	0.15
Rheumatism, except the back, n.e.c.	24	0.13
Animal or insect bites	23	0.12
Hernia, n.e.c.	22	0.12

Figures

4 Month *of* Occurrence

All Reported Accidents, Not Specifically Rejected/2000

Month of Occurrence	#	%
January	3110	7.80
February	3315	8.32
March	3337	8.37
April	2900	7.27
May	3464	8.69
June	3456	8.67
July	3467	8.70
August	3665	9.19
September	3376	8.47
October	3618	9.08
November	3504	8.79
December	2654	6.66

5 Number *of* Days

Between Board Notification and Claim Adjudication

Time loss Accidents/2000

Days	%
0-5	30.66
6-10	19.58
11-20	25.68
21-30	11.31
31-40	4.90
41-60	4.64
61-90	1.83
91-183	1.16
184-365	0.22
> 365	0.02

6 Percentage *of* Accidents Reported *by Class/2000*

Class	%
City of Wpg.	2.4
Class E	90.1
CPR/CNR,Air Can,Via	2.1
Govt. Can.	1.8
Prov. Man.	3.7

7 Time loss Accidents *by Source of Injury*

All Time loss Accidents, Not specifically Rejected/2000 • Not Elsewhere Classified - n.e.c. • Unspecified - uns

Source	%
Bodily motion or position of injured, ill worker	23.93
Health care patient or resident of health care facility	5.24
Boxes, crates, cartons	4.31
Floor of building	4.14
Ground	3.31
Knives	2.44
Metal chips, particles	1.81
Doors	1.51
Nonclassifiable	1.33
Vehicle & mobile equip. parts, n.e.c.	1.33
Bags, sacks, totes	1.29
Buckets, baskets, pails	1.26
Cart, dolly, handtruck	1.25
Skids, pallets	1.02
Bars, rods, reinforcing bar (rebar)	0.95
Machinery, uns	0.86
Wood, lumber, uns	0.72
Dirt particles	0.71
Metal materials—nonstructural, n.e.c.	0.70
Cabinets, cases—display, storage	0.67
Person—other than injured or ill worker, n.e.c.	0.64
Plywood, wood paneling; particle, chip, flake board	0.62
Pots, pans, trays	0.61
Nails, brads, tacks	0.60
Tables, worktables	0.60
Dies, molds, patterns	0.57
Tanks, bins, vats	0.55
Plates, metal panels	0.53
Bundles, bales	0.52
Glass, window panes	0.52
Parking lots	0.50
Reels, rolls	0.50
Food slicers	0.50
Stairs, steps—indoors	0.49
Pipes, ducts, tubing, n.e.c.	0.48
Semitrailer, tractor trailer, trailer truck	0.48
Sheet metal	0.44
Drills—powered	0.44
Automobile	0.44
Machinery, n.e.c.	0.43
Table saws	0.38
Water	0.37
Bodily conditions of injured, ill worker	0.37
Pallet lift truck—motorized	0.36
Containers—pressurized, n.e.c.	0.35
Truck, uns	0.34
Parts & materials, n.e.c.	0.34
Grinders, abraders	0.33
Beams	0.33
Sledges	0.31

Source	%
Welding and heating handtools—powered, uns	0.31
Windows	0.30
Barrels, kegs, drums	0.29
Stairs, steps, uns	0.28
Garment racks, other racks	0.28
Structural metal materials, n.e.c.	0.27
Furniture, uns	0.27
Chips, particles, splinters, n.e.c.	0.26
Chemical products, uns	0.26
Bus	0.26
Ramps, runways, loading docks	0.25
Spot welding machinery	0.25
Stairs, steps—outdoors	0.25
Chairs	0.25
Forklift, uns	0.24
Wrenches	0.24
Walls	0.24
Other structures, uns	0.23
Tires, except bike	0.23
Machine and appliance parts, n.e.c.	0.23
Metal sheets, ingots, bars—nonstructural	0.23
Beds, bedding, mattresses	0.23
Fats, oils	0.22
Molten or hot metals, slag	0.22
Wheels, tire rims	0.22
Metal materials—nonstructural, uns	0.22
Hoses	0.21
Sidewalks, paths, outdoor walkways	0.21
Gates	0.20
Wood chips, sawdust	0.20
Drills—stationary	0.20
Machine, tool, & electric parts, uns	0.19
Cans	0.19
Noise	0.19
Band saws	0.18
Parts & materials, uns	0.18
Ice, sleet, snow	0.18
Rollers	0.18
Wood, lumber, n.e.c.	0.18
Floors, walkways, ground surfaces, uns	0.18
Logs, limbed or unlimbed	0.17
Machine and appliance parts, uns	0.17
Concrete blocks, cinder blocks	0.17
Cases, cabinets, racks, shelves, n.e.c.	0.17
Jacks, uns	0.16
Drums, pulleys, sheaves	0.16
Scrap, waste, debris, uns	0.15
Sewing, stitching machinery	0.15
Glass chips or fibers	0.15
Hammers	0.15

8 Time loss Accidents *by Occupational Grouping*

All Time loss Accidents, Not specifically Rejected/2000 • Not Elsewhere Classified - n.e.c. • Unspecified - uns

Occupation	#	%	Occupation	#	%
Other labourers, processing	1292	6.81	Bakers	89	0.47
Nurse aides & orderlies	906	4.78	Roofers & shinglers	89	0.47
Material handlers	793	4.18	Construction millwrights	86	0.45
Truck drivers	723	3.81	Plumbers	82	0.43
Motor vehicle assemblers	699	3.69	Printing machine operators	77	0.41
Construction trades helpers	677	3.57	Dry clean & laundry	77	0.41
Welders	567	2.99	Aircraft assemblers	76	0.40
Shippers & receivers	498	2.63	Social service & community worker	72	0.38
Janitors, caretakers	453	2.39	Auto mech installers & service	71	0.37
Nurses, registered	427	2.25	Managesrs - retail trade	67	0.35
Grocery clerks & shelf stockers	362	1.91	Machining tool operators	67	0.35
Motor vehicle mechanics	343	1.81	Teaching assts, elementary & secondary	64	0.34
Labourer food, beverage	324	1.71	Cabinet makers	64	0.34
Other trades helpers n.e.c.	307	1.62	Labourer wood, pulp & paper	64	0.34
Cleaners, light duty	305	1.61	Police officers (excpt commish.)	63	0.33
Labourer metal fabrication	297	1.57	Clerks, parts & storekeepers	62	0.33
Butchers & meatcutters, ind.	285	1.50	Letter carriers	61	0.32
Cooks	282	1.49	Clerks, mail postal	61	0.32
Heavy duty equip. mechanics	270	1.42	Clerks, general office	60	0.32
Sales clerks, retail	252	1.33	Hide & pelt processing	56	0.30
Visiting homemakers	232	1.22	Plasterers, drywall installers	54	0.28
Delivery drivers	231	1.22	Air transport ramp attendant	54	0.28
Public works workers	213	1.12	Security guards	52	0.27
Painters & coaters, mfg.	188	0.99	Landscape maintenance workers	51	0.27
Metalworking mach. operators	173	0.91	Painters & decorators	51	0.27
Srvce occup, elemental n.e.c.	170	0.90	Miners, underground production	50	0.26
Furn. & fixture assemblers	169	0.89	Chemical plant machine operators	49	0.26
Cleaners, specialized	162	0.85	Corrections service officers	48	0.25
Carpenters	161	0.85	General farm workers	47	0.25
Food & beverage servers	160	0.84	Machinery operators, mineral & metal	46	0.24
Food srvce counter attdnts	150	0.79	Plastics process machine operators	46	0.24
Heavy equip. oper. (except cranes)	142	0.75	Rail & motor transport labour	45	0.24
Dietitians & nutritionists	139	0.73	Mech. assemblers & inspectors	44	0.23
Electrician (excpt ind.)	138	0.73	Clerks, customer service	43	0.23
Cashiers	133	0.70	Bus drivers / transit operators	42	0.22
Other wood prod. assemblers	130	0.69	Ambulance attendants	40	0.21
Assmblrs, elec. appliances	129	0.68	Early childhood educ. assts	39	0.21
Other assemblers & inspectors	125	0.66	Attendants in amusement	38	0.20
Foundry workers	116	0.61	Sales rep, wholesale	35	0.18
Other prod. machine operators	115	0.61	Aides & assts, other	35	0.18
Woodworking mach. operators	115	0.61	Refrigeration & air cond mechanics	35	0.18
Firefighters	113	0.60	Steamfitters, pipefitters	35	0.18
Couriers & messengers	113	0.60	Electrician, industrial	34	0.18
Kitchen & food srvc helper	109	0.57	Labourer mineral & metal	34	0.18
Sheet metal workers	107	0.56	Butchers & meat cutters	34	0.18
Sewing macnine operators	103	0.54	Mgrs - restaurant & food	31	0.16
Welders & soldering	101	0.53	Process cntrl, food & beverage	31	0.16
Machinists & machining	97	0.51	Upholsterers	30	0.16
Res. & commercial installers	97	0.51	Printing press operators	30	0.16
Motor vehicle body repairers	90	0.47	Med. & hosp. assts, elemental n.e.c.	28	0.15

Tables

1 Accidents Reported *by Class/2000*

Reported means accidents in 2000, whether occurring in 2000 or in previous years

Class	2000	Fatalities	1999	Fatalities
City of Wpg.	1,122	3	1,177	0
Class E	42,546	39	40,772	31
CPR/CNR,Air Can,Via	975	2	986	4
Govt. Can.	830	2	804	0
Prov. Man.	1,748	2	1,913	1
Grand Total	47,221	48	45,652	36

2 Compensable Accidents Settled *by Class/2000*

All Time loss Accidents, Not Specifically Rejected/2000

Class	No Cost Claims	Medical Aid Only	Temporary Disability	Permanent Disability	Fatality	**Total	Average Days Lost per Accident 2000	1999	Average Weekly Wage	Average Age
City of Wpg.	72	264	554	27	2	583	17.0	14.9	774	41
Class E	4,087	13,479	16,262	611	15	16,888	24.5	23.1	508	36
CPR/CNR,Air Can,Via	159	465	206	35	0	241	38.9	38.8	891	43
Govt. Can.	110	200	306	15	1	322	19.5	17.6	718	43
Prov. Man.	278	544	535	28	1	564	29.8	33.3	568	40
Grand Total	4,706	14,952	17,863	716	19	18,598	24.5	23.2	526	37

3 Compensable Accidents Settled *2000*

All Time loss Accidents, Not Specifically Rejected/2000

			Number of Cases					Average		
Group #	Employer Types	Rate Code	Medical Aid Only	Temporary Disability	Permanent Disability	Fatality	Total	Days Lost per Accident (Temporary Disability)	Weekly Wage	Age
Group 1	Forestry	101	4	5	2	0	7	33.0	420	37
		191	27	13	4	0	17	53.6	570	33
Group 2	Mines, Quarries and Oil Wells	201	482	107	36	1	144	45.0	1061	39
		202	25	23	7	0	30	54.3	798	31
		203	20	5	8	0	13	251.8	1496	44
Group 3	Manufacturing	301	634	468	17	0	485	21.7	441	35
		302	256	331	20	0	351	22.3	566	36
		303	86	61	5	1	67	21.1	482	36
		310	2045	2714	69	2	2785	17.1	603	36
		311	504	603	23	1	627	14.2	469	34
		312	204	59	10	0	69	28.0	749	35
		313	42	101	3	0	104	13.1	393	29
		314	1142	1338	38	0	1376	15.6	419	32
		315	368	614	20	0	634	20.9	417	37
		316	282	361	10	1	372	20.1	460	34
		319	111	92	5	0	97	19.6	438	37
		320	132	162	6	0	168	19.6	778	42
		321	5	18	0	0	18	29.1	670	36
Group 4	Construction	401	631	720	62	1	783	39.7	555	35
		402	436	321	20	2	343	27.9	708	35
		404	99	150	11	1	162	34.2	589	34
		405	48	24	5	0	29	13.7	786	34
		406	39	23	4	0	27	20.7	1047	36
		407	94	64	9	0	73	52.4	678	38
		408	146	168	19	0	187	32.6	680	37
		409	17	9	5	0	14	61.9	609	29
Group 5	Transportation, Communications and Storage	501	427	840	38	2	880	38.3	619	38
		502	72	75	5	0	80	18.3	517	36
		503	97	103	3	0	106	31.3	526	40
		505	68	74	3	0	77	19.8	823	40
		506	67	138	0	0	138	24.9	493	37
Group 6	Trade	601	910	1160	18	0	1178	25.4	358	34
		602	83	73	1	0	74	32.4	320	34
		603	246	443	7	0	450	21.4	476	36
		604	599	487	24	1	512	20.0	565	35
		605	231	256	8	0	264	15.3	637	37
		607	1	1	6	0	7	2.0	320	19
		609	25	18	2	0	20	34.2	624	39

3 Compensable Accidents Settled *2000*

continued...

Group #	Employer Types	Rate Code	Number of Cases: Medical Aid Only	Temporary Disability	Permanent Disability	Fatality	Total	Average: Days Lost per Accident (Temporary Disability)	Weekly Wage	Age
Group 7	Service Industries	701	883	853	17	0	870	18.9	278	32
		702	981	2011	17	1	2029	33.4	487	41
		703	13	9	0	0	9	98.2	313	40
		704	5	2	0	0	2	13.0	580	43
		705	49	64	1	0	65	28.5	213	39
		706	43	88	1	0	89	44.9	335	39
		707	34	67	1	0	68	14.8	377	36
		710	9	9	1	0	10	33.2	269	34
		713	3	2	0	0	2	11.5	566	43
		714	1	0	0	0	0	0.0	0	0
Group 8	Public Administration	801	108	115	7	0	122	30.4	561	40
		802	12	10	1	0	11	10.1	552	38
Group 9	Voluntary by Application	901	89	85	6	0	91	33.7	382	39
		902	87	118	7	0	125	31.3	459	33
		903	84	104	1	0	105	34.0	431	38
		904	35	28	4	1	33	32.8	510	34
		905	27	49	2	0	51	34.1	362	33
		906	1	2	1	0	3	19.0	517	43
		907	2	3	0	0	3	113.0	599	41
		909	42	69	1	0	70	21.4	612	37
		911	2	6	0	0	6	38.3	411	31
		912	36	47	2	0	49	35.3	640	41
		916	0	2	0	0	2	9.5	385	25
		918	3	0	0	0	0	0.0	0	0
		921	183	294	6	0	300	19.7	533	44
		922	2	2	1	0	3	6.0	176	22

4 Accidents Settled & Reported *1991-2000*

	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Medical aid only	12,317	16,103	13,923	13,303	14,986	14,039	14,039	15,822	15,125	14,952
No cost claims	5,326	5,682	4,883	4,509	4,526	4,333	4,391	4,752	4,820	4,706
Temporary disability	18,271	16,993	15,509	16,985	17,574	15,415	16,636	17,704	19,128	17,863
Permanent disability	543	742	684	784	748	702	670	659	649	716
Fatality	12	13	25	20	22	27	21	22	23	19
Total time loss claims	18,826	17,748	16,218	17,789	18,344	16,144	17,327	18,385	19,800	18,598
Total compensable accidents settled	36,469	39,533	35,024	35,601	37,856	34,516	35,757	38,959	39,745	38,256
Total Accidents Reported	44,588	42,203	37,581	42,004	42,378	41,535	43,831	45,999	45,652	47,221

5a Fatality Claims Processed in *2000*

Fatalities reported in 2000	
New claims	34
Prior year claims *	14
Fatalities adjudicated in 2000	
Not accepted	28
Accepted **	19
Fatalities adjudicated in 2000	
Estate, medical only	00
Dependent pensions	
Widow(er)s***	19
Children	14

* One of the prior year claims was reported to the WCB in 1999 but not properly recorded until after the 1999 annual report statistics were published. it has been recorded as a 2000 fatality. The employer is the City of Winnipeg.

** One of the fatalities listed as "accepted" for 2000 was listed as "not accepted" in previous year.

*** Widows may have taken their entitlement as a lump sum rather than monthly pension.

5b Fatalities Accepted *by Cause*

	1996	1997	1998	1999	2000
Cancer	12	6	3	6	7
Trauma	5	9	10	10	6
Motor Vehicle Accident	5	-	2	2	0
Cardiac	2	1	1	4	2
Other	3	5	6	1	4
Total	27	21	22	23	19

6 Average Duration *of* Settled Claims *by Accident Year*

Year of Accident	1994		1995		1996		1997		1998		1999		2000	
	Average Days	% of Days	Average Days	% of Days	Average Days	% of Days	Average Days	% of Days	Average Days	% of Days	Average Days	% of Days	Average Days	% of Days
Current year	15.8	44.0%	15.7	39.0%	14.9	37.0%	14.4	41.0%	14.8	42%	15.1	45%	15.2	43%
Previous year	58.4	25.0%	67.8	32.0%	65.2	32.0%	62.3	31.0%	61.3	28%	58.2	30%	65.4	31%
All prior years	508.6	31.0%	447.7	29.0%	475.8	31.0%	411.7	28.0%	412.2	30%	366.3	25%	385.1	26%

7 Class E Employers *Assessment Statistics • 1990-2000*

Year	Number Registered	Assessable Payrolls ($millions)	Assessments ($thousands)	Average Assessment Revenue per $100 of Payroll
2000	**23,400	*7,998	*118,747	*1.49
1999	22,962	7,567	110,185	1.46
1998	22,413	7,227	134,484	1.86
1997	20,961	6,814	141,376	2.07
1996	21,114	6,302	141,507	2.25
1995	20,452	6,253	138,758	2.22
1994	19,875	5,920	128,978	2.20
1993	19,350	5,756	123,834	2.15
1992	19,200	5,688	122,329	2.15
1991	19,295	5,400	121,661	2.25
1990	19,751	5,435	124,288	2.29

* Estimated amount - final 2000 information will not be available until mid-2001

** Registered employers (including independent contractors) as of December 31, 2000

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